

515-376-9054

(Fax Number)

ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

Wellmark, Inc.

NAIC Group Code	0770, 0770	NAIC Company Code 88848	Employer's ID Number 42-0318333
(Current	t Period) (Prior Period)		
Organized under the Law	s of IA	State of Domicile or Port of Entry IA	Country of Domicile US

Is HMO Federally Qualified? Yes [] No [] Licensed as Business Type Life, Accident & Health Incorporated/Organized..... September 19, 1939 Commenced Business..... October 1, 1939

1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901 Statutory Home Office (Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901 515-376-4500 (City or Town, State, Country and Zip Code) (Street and Number) (Area Code) (Telephone Number)

Mail Address 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901

(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

515-376-4500 Primary Location of Books and Records 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901

(Street and Number) (City or Town, State, Country and Zip Code)

(Area Code) (Telephone Number) Internet Web Site Address www.wellmark.com

515-376-4144 Statutory Statement Contact Christa Daneen Kuennen

(Area Code) (Telephone Number) (Extension)

kuennencd@wellmark.com (E-Mail Address)

OFFICERS

Title Title Name Chairman & CEO

1. John Douglas Forsyth 2. Francis (Frank) James Stork Secretary EVP, CFO & Treasurer 3. David Seth Brown

OTHER

Marcelle Jo Chickering Michael James Crowley G. Paul Eddy Cory Randall Harris Vicki Lynn Signor

John Thomas Clendenin # Michele Ann Druker

Timothy Robert Gutshall MD Laura Jean Jackson

DIRECTORS OR TRUSTEES

Thomas Matthew Cink MD William Curt Hunter David George Neil

Melanie Creagan Dreher PhD, RN Paul Edward Larson Timothy John Theriault

John Douglas Forsyth-Chairman Angeline Marie Lavin Therese Michele Vaughan

Daryl Keith Henze Terrence Joseph Mulligan

State of lowa County of..... Polk

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

	(Signature)		(Signature)	(Signature)
	John Douglas Forsyth	Fra	ncis (Frank) James Stork	David Seth Brown
	(Printed Name)		2. (Printed Name)	3. (Printed Name)
	Chairman & CEO		Secretary	EVP, CFO & Treasurer
	(Title)		(Title)	(Title)
Subscribed a	nd sworn to before me		a. Is this an original filing?	Yes [X] No []
This	day of	2019	b. If no 1. State the amend	lment number
			2. Date filed	
			Number of pages	s attached

ASSETS

			Current Year	_	Prior Year
		1 Accete	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1	Panda (Cahadula D)	Assets		,	
	Bonds (Schedule D)	877,978,768 .		877,978,768	893,364,993
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks	862,172,754 .	17,157,390	845,015,364	884,970,821
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens			0	
	3.2 Other than first liens			0	
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0 encumbrances)	155,804,028		155,804,028	162,809,577
	4.2 Properties held for the production of income (less \$0 encumbrances)			0	
	4.3 Properties held for sale (less \$0 encumbrances)			0	
5.	Cash (\$90,156,934, Schedule E-Part 1), cash equivalents (\$59,067,316, Schedule E-Part 2) and short-term investments (\$13,432,227, Schedule DA)	162,656,477		162,656,477	147,328,863
6.	Contract loans (including \$0 premium notes)			0	
	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets (Schedule DL)				
11.					
	Subtotals, cash and invested assets (Lines 1 to 11)				
	Title plants less \$0 charged off (for Title insurers only)				
14.	Investment income due and accrued		43,212	7,454,143	7,184,753
	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	82,488,574		82,488,574	90,874,635
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$0 earned but unbilled premiums)			12,329,889	16 455 885
16	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	50.095	E0 09E	0	
		, i	,		
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset		8,151,000	27,099,000	10,470,000
19.	Guaranty funds receivable or on deposit	23,270,000 .		23,270,000	23,270,000
20.	Electronic data processing equipment and software	3,051,783	257,447	2,794,336	4,459,483
21.	Furniture and equipment, including health care delivery assets (\$0)	15,834,834	15,834,834	0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	
23.	Receivables from parent, subsidiaries and affiliates		3,230,269	33,005	4,254,464
24.	Health care (\$53,549,425) and other amounts receivable	79,980,625	10,725,138	69,255,487	60,042,604
	Aggregate write-ins for other-than-invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)				
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
	TOTAL (Lines 26 and 27)				
20.		OF WRITE-INS	102,024,000	2,400,000,000	
101	DETAILS			0	
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.	Prepaid Premium Tax Assets	41,913,239	41,913,239	0	
2502.	Prepaid Pension Costs	25,088,716	25,088,716	0	
	Other Prepaid Expenses			0	
	Summary of remaining write-ins for Line 25 from overflow page		1,912,459	580,061	601,563
2599	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		87,512,746	580,061	601,563

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAI		Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$0 reinsurance ceded)				
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses				
				3,794,006	4,005,076
4.	Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	52,896,427		52,896,427	63,022,744
5.	Aggregate life policy reserves			0	
6.	Property/casualty unearned premium reserves				
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued				
	Current federal and foreign income tax payable and interest thereon			200,200,	
	(including \$0 on realized capital gains (losses))			0	
10.2	Net deferred tax liability			0	
11.	Ceded reinsurance premiums payable			0	
12.	Amounts withheld or retained for the account of others			2,649,940	2,701,161
13.	Remittances and items not allocated	20,784,030		20,784,030	20,169,630
14.	Borrowed money (including \$0 current) and interest				
	thereon \$0 (including \$0 current)				
	Amounts due to parent, subsidiaries and affiliates				
16.	Derivatives				
17.	Payable for securities			9,105,426	2,308,037
18.	Payable for securities lending			0	
19.	Funds held under reinsurance treaties with (\$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers)			0	
20.	Reinsurance in unauthorized and certified (\$0) companies			0	
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	
22.	Liability for amounts held under uninsured plans	41,058,371		41,058,371	52,613,725
23.	Aggregate write-ins for other liabilities (including \$2,146,598 current)	23,569,779	0	23,569,779	44,124,195
24.	Total liabilities (Lines 1 to 23)	871,361,997	0	871,361,997	899,403,414
25.	Aggregate write-ins for special surplus funds	xxx	XXX	0	46,400,000
26.	Common capital stock	xxx	XXX		
27.	Preferred capital stock	xxx	XXX		
28.	Gross paid in and contributed surplus	xxx	XXX		
29.	Surplus notes.		XXX		
30.	Aggregate write-ins for other-than-special surplus funds	xxx	XXX	0	0
31.	Unassigned funds (surplus)				
	Less treasury stock at cost:				
02.	32.10.000 shares common (value included in Line 26 \$0)	XXX	XXX		
	32.20.000 shares preferred (value included in Line 27 \$0)				
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	1			
34.	Total liabilities, capital and surplus (Lines 24 and 33)				
34.		•		2,430,003,900	2,423,322,002
2201	Other Liabilities	S OF WRITE-INS		21 668 562	21,104,921
	Liability for Postretirement Benefits				
	Escheat Liability				
	Summary of remaining write-ins for Line 23 from overflow page				
	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)				
1	Special Surplus for Health Insurer Fee				
	Openial Curpius to Troub model 1 Co.				
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				
T .					
3002.		XXX	XXX		
3003.		xxx	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	xxx	XXX	0	0
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES Current Year 1 2

		1 Uncovered	2 Total	3 Total
1.	Member months	XXX	14,804,430	15,050,662
2.	Net premium income (including \$0 non-health premium income)	XXX	2,615,762,137	2,656,090,417
3.	Change in unearned premium reserves and reserve for rate credits	XXX	10,126,318	(9,147,114)
4.	Fee-for-service (net of \$0 medical expenses)	XXX		
5. I	Risk revenue	XXX		
6.	Aggregate write-ins for other health care related revenues	XXX	0	0
7	Aggregate write-ins for other non-health revenues	XXX	0	0
8.	Total revenues (Lines 2 to 7)	XXX	2,625,888,455	2,646,943,303
Hospit	al and Medical:			
9.	Hospital/medical benefits		1,490,321,649	1,519,418,129
10. (Other professional services		230,496,928	227,525,327
11.	Outside referrals		71,914,523	73,034,469
12.	Emergency room and out-of-area		88,081,354	83,575,526
13. I	Prescription drugs		362,652,272	351,274,618
14.	Aggregate write-ins for other hospital and medical		0	0
15.	Incentive pool, withhold adjustments and bonus amounts		20,527,446	21,439,334
16.	Subtotal (Lines 9 to 15)		2,263,994,172	2,276,267,403
Less:				
	Net reinsurance recoveries			
18.	Total hospital and medical (Lines 16 minus 17)	0	2,263,994,172	2,275,307,305
	Non-health claims (net)			
	Claims adjustment expenses, including \$18,798,597 cost containment expenses			
21.	General administrative expenses		274,070,264	262,907,000
	Increase in reserves for life and accident and health contracts including \$0 increase in reserves for life only)			
23.	Total underwriting deductions (Lines 18 through 22)	0	2,629,917,356	2,636,059,832
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(4,028,901)	10,883,471
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		118,330,682	44,487,930
26.	Net realized capital gains or (losses) less capital gains tax of \$8,365,000		39,668,479	14,942,052
27.	Net investment gains or (losses) (Lines 25 plus 26)	0	157,999,161	59,429,982
,	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0)]			
29.	Aggregate write-ins for other income or expenses	0	(312,917)	(19,659,439)
	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	153,657,343	51,015,081
31.	Federal and foreign income taxes incurred	XXX	26,181,593	7,926,000
32.	Net income (loss) (Lines 30 minus 31)	XXX	127,475,750	43,089,081
1	DETAILS OF WRIT			
	Summary of remaining write-ins for Line 6 from overflow page			
	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)			
	Summary of remaining write-ins for Line 7 from overflow page Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)			
	Totals (Lines 0701 tillough 0700 pius 0730) (Line 7 above)			
	Summary of remaining write-ins for Line 14 from overflow page			
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			
	Other Expense		(3,400)	,
	Contribution Expense		` ' /	, , , ,
	Summary of remaining write-ins for Line 29 from overflow page			
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)			

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EXPENSES	(Continued)	
	OADITAL AND OUDD! !!!!	1	2
-	CAPITAL AND SURPLUS ACCOUNT	Current Year	Prior Year
33.	Capital and surplus prior reporting period	1,524,119,468	1,330,274,686
34.	Net income or (loss) from Line 32	127,475,750	43,089,081
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains and (losses) less capital gains tax of \$(17,188,000)	(64,495,326)	125,163,655
37.	Change in net unrealized foreign exchange capital gain or (loss)	(4,247,953)	9,667,787
38.	Change in net deferred income tax	6,948,000	(28,992,000)
39.	Change in nonadmitted assets	(20,075,318)	50,200,951
40.	Change in unauthorized and certified reinsurance		
41.	Change in treasury stock		
42.	Change in surplus notes.		
43.	Cumulative effect of changes in accounting principles		
44.	Capital changes:		
	44.1 Paid in		
	44.2 Transferred from surplus (Stock Dividend)		
	44.3 Transferred to surplus		
45.	Surplus adjustments:		
	45.1 Paid in		
	45.2 Transferred to capital (Stock Dividend)		
	45.3 Transferred from capital		
46.	Dividends to stockholders		
47.	Aggregate write-ins for gains or (losses) in surplus	(2,420,638)	(5,284,692)
48.	Net change in capital and surplus (Lines 34 to 47)	43,184,515	193,844,782
49.	Capital and surplus end of reporting period (Line 33 plus 48)	1,567,303,983	1,524,119,468
	DETAILS OF WRITE-INS		
4701.		(2,420,638)	(5,284,692)
4702.		 	
4703.		 	
	Summary of remaining write-ins for Line 47 from overflow page	0	0
	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)		(5.284.692)
			. , , , , , , , , , , , , , , , , , , ,

CASH FLOW

	CASH FLOW		
		1 Current Year	2 Prior Year
	CASH FROM OPERATIONS		
1.	Premiums collected net of reinsurance	2,635,769,496	2,644,690,156
2.	Net investment income		
3.	Miscellaneous income		
4.	Total (Lines 1 through 3)		
5.	Benefit and loss related payments	2,256,745,582	2,291,517,063
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	378,169,948	335,797,483
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$8,365,000 tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	2,685,543,864	2,649,304,412
11.	Net cash from operations (Line 4 minus Line 10)	11,906,851	46,705,072
	CASH FROM INVESTMENTS		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	658,359,628	250,160,044
	12.2 Stocks	285,307,473	81,691,828
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets	2,106,373	276,001
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(5,651)	(7,629
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	653,856,979	380,118,703
	13.2 Stocks		88,879,464
	13.3 Mortgage loans		
	13.4 Real estate		(880,162
	13.5 Other invested assets	30,987,851	1,851,707
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
14.	Net increase (decrease) in contract loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14)	(14,115,573)	(136,067,416
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES		, , ,
16.	Cash provided (applied):		
10.	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)		
17	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		
17.		17,330,330	100,088,000
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	45.007.044	44.007.500
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	15,327,614	44,037,509
19.	Cash, cash equivalents and short-term investments:	4.7 000 000	400 004 0=
	19.1 Beginning of year		
	19.2 End of year (Line 18 plus Line 19.1)	162,656,477	147,328,863

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

1				: _:::==	<u> </u>					- 10
	1 Total	2 Comprehensive (Hospital and Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plans	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
Net premium income	2,615,762,137	1,658,744,809	420,740,050	27,763,435	915,225	242,891,867			264,706,751	
Change in unearned premium reserves and reserve for rate credit	10,126,318	(1,626,946)		21,100,400		11,712,174			204,700,731	
Strange in unearited premium reserves and reserve for rate credit. Fee-for-service (net of \$0 medical expenses)		(1,020,340)	41,030			11,712,174				XXX
Risk revenue.										XXX
Aggregate write-ins for other health care related revenues.	0	Λ	0	0	Λ	0	Λ	0	0	XXX
Aggregate write-ins for other non-health care related revenues Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7. Total revenues (Lines 1 to 6)	2,625,888,455	1,657,117,863	420,781,140	27,763,435	915,225	254,604,041		0	264,706,751	
8. Hospital/medical benefits.	1,490,321,649	918,467,738	273,804,523	21,705,455	313,223	136,785,031	0	0	161,264,357	XXX
Other professional services.	230,496,928	128,150,299	38,202,900	21.869.211	688.824	19,085,093			22,500,601	XXX
10. Outside referrals.	71,914,523	44,320,076	13,212,263	21,009,211	000,024	6,600,475			7,781,709	XXX
11. Emergency room and out-of-area	88,081,354	54,283,505	16,182,462			8.084.302			9,531,085	XXX
12. Prescription drugs	362,652,272	259,268,494	10, 102,402			57,387,688			45,983,574	XXX
Aggregate write-ins for other hospital and medical	0	0	12,510	0				0	45,965,574	XXX
Aggregate write-ins for other hospital and medical	20.527.446	20.527.446	0	0	0	0	0		0	XXX
15. Subtotal (Lines 8 to 14)	2.263.994.172	1,425,017,558	341.414.664	21.869.211	688.824	227.942.589	Λ	Λ	247.061.326	XXX
16. Net reinsurance recoveries.	0	1,425,017,556	341,414,004	21,009,211	000,024	221,942,509	0	U .	241,001,320	XXX
17. Total hospital and medical (Lines 15 minus 16)	2,263,994,172	1,425,017,558	341,414,664	21,869,211	688.824	227,942,589	Λ	0	247,061,326	XXX
18. Non-health claims (net)	2,203,994,172	XXX	XXX	XXXXXX	XXX	XXX	XXX	XXX	XXXXX	
Non-nealth claims (net)	91,852,920	21,625,116	13,405,160	1.362.992	99,342	18.018.640			37.341.670	
20. General administrative expenses	274,070,264	182,377,875	62,603,941		99,342	6,206,940			18,554,678	707.400
·	2/4,0/0,204	102,377,073	02,003,941	3,400,740	43,397	0,200,940			10,554,070	797,488
	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
		1,629,020,549	417,423,765	26,717,948	831,763				302,957,674	707.400
23. Total underwriting deductions (Lines 17 to 22)	2,629,917,356		, ,	' '	,	' '	0	0	, ,	797,488
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	(4,028,901)	28,097,314	3,357,375	1,045,487	83,462	2,435,872	0	U .	(38,250,923)	(797,488
T			DETAILS OF	WRITE-INS		I				
0501	0									XXX
0502.	0									XXX
0503.	0									XXX
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	XXX
0599. Total (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0 .	0	XXX
0601	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(
0699. Total (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(
1301	0									XXX
1302.	0									XXX
1303	0									XXX
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	XXX
1399. Total (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0 .	0	XXX

PART 1 - PREMIUMS

	FANT I - FREINIUNIS									
		1	2	3	4					
					N . B					
		D : 1	р :	В.	Net Premium					
	1. (0.)	Direct	Reinsurance	Reinsurance	Income					
-	Line of Business	Business	Assumed	Ceded	(Cols. 1 + 2 - 3)					
1	. Comprehensive (hospital and medical)	1,658,744,809								
Ι.	Composition (notice and necess)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
1 2	Medicare supplement	420 740 050								
	medicale supplement.	420,140,000								
١,	Dental only	27,763,435			27,763,435					
3	. Deliai uiiy	21,763,433								
١,	White role	045 005			915,225					
4	Vision only	915,225			915,225					
Ι.		040 004 007			040 004 007					
;	5. Federal employees health benefits plan	242,891,867			242,891,867					
					_					
1	S. Title XVIII - Medicare									
1	7. Title XIX - Medicaid									
8	3. Other health	264,706,751								
(). Health subtotal (Lines 1 through 8)	2,615,762,137	0		02,615,762,137					
1	0. Life									
1	1. Property/casualty				0					
Ι.										
1	2. Totals (Lines 9 to 11)	2 615 762 137	0		2,615,762,137					
	2. Totalo (Lines V to 11)	2,010,702,107			J					

PART 2 - CLAIMS INCURRED DURING THE YEAR

			Z - CLAINS INC	OKKED DOKING	IIIL ILAN					
	1	2 Comprehensive	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
	Total	(Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Health Benefits Plan	XVIII Medicare	XIX Medicaid	Other Health	Other Non-Health
Payments during the year:		,		,	,					
1.1 Direct	2,237,723,883	1,409,142,091	341,311,772	21,576,009	683,979	223,137,024			241,873,008	
1.2 Reinsurance assumed	0									
1.3 Reinsurance ceded	1,701,770	1,701,770								
1.4 Net	2,236,022,113	1,407,440,321	341,311,772	21,576,009	683,979	223,137,024	0	0	241,873,008	0
2. Paid medical incentive pools and bonuses	20,723,469	20,723,469								
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct	350,292,672	226,562,100	67,220,196	1,499,703	20,641	30,217,253			24,772,779	
3.2 Reinsurance assumed	0									
3.3 Reinsurance ceded	0									
3.4 Net	350,292,672	226,562,100	67,220,196	1,499,703	20,641	30,217,253	0	0	24,772,779	0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct	0									
4.2 Reinsurance assumed	0									
4.3 Reinsurance ceded	0									
4.4 Net	0	0	0	0	0	0	0	0	0	0
Accrued medical incentive pools and bonuses, current year	18,795,281	18,795,281								
Net healthcare receivables (a)	(3,674,331)	(3,322,474)	461,016			372,162			(1,185,035)	
7. Amounts recoverable from reinsurers December 31, current year	50,085	50,085								
8. Claim liability December 31, prior year from Part 2A:	·	·								
8.1 Direct	348,224,160	234,536,553	66,656,288	1,206,501	15,796	25,039,526			20,769,496	
8.2 Reinsurance assumed	0									
8.3 Reinsurance ceded	0									
8.4 Net	348,224,160	234,536,553	66,656,288	1,206,501	15,796	25,039,526	0	0	20.769.496	0
9. Claim reserve December 31, prior year from Part 2D:	, , , , , ,	,,,,,,,,,	,,	,,			•		, , , , , ,	
9.1 Direct	0									
9.2 Reinsurance assumed	0									
9.3 Reinsurance ceded	0									
9.4 Net	0	0	0	0	0	0	0	0	0	0
Accrued medical incentive pools and bonuses, prior year		18,991,304								
Amounts recoverable from reinsurers December 31, prior year	1,751,855	1,751,855								
12. Incurred benefits:										
12.1 Direct	2.243.466.726	1.404.490.112	341.414.664	21,869,211	688.824	227.942.589	0	0	247.061.326	0
12.2 Reinsurance assumed.	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
12.4 Net	2,243,466,726	1,404,490,112	341,414,664	21,869,211	688,824	227,942,589	0	0	247,061,326	0
13. Incurred medical incentive pools and bonuses		20,527,446	0	0	,	, ,	0	0	0	0
	20,021,770	20,021,7770								

⁽a) Excludes \$.......0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

			PART ZA - CLAIN	O LINDILIT I LITE	OI OOMMENT IE					
	1	2	3	4	5	6 Federal	7	8	9	10
	Total	Comprehensive (Medical and Hospital)	Medicare Supplement	Dental Only	Vision Only	Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
Reported in process of adjustment:										
1.1 Direct	205,714,187	136,898,012	37,679,166	299,941	4,128	18,032,556			12,800,384	
1.2 Reinsurance assumed										
1.3 Reinsurance ceded										
1.4 Net		136,898,012	37,679,166	299,941	4,128	18,032,556	0	0	12,800,384	0
Incurred but unreported:										
2.1 Direct	144,578,485	89,664,088	29,541,030	1,199,762	16,513	12,184,697			11,972,395	
2.2 Reinsurance assumed										
2.3 Reinsurance ceded										
2.4 Net	144,578,485	89,664,088	29,541,030	1,199,762	16,513	12,184,697	0	0	11,972,395	0
Amounts withheld from paid claims and capitations:										
3.1 Direct										
3.2 Reinsurance assumed										
3.3 Reinsurance ceded										
3.4 Net		0	0	0	0	0	0	0	0	0
4. Totals:										
4.1 Direct		226,562,100	67,220,196	1,499,703	20,641	30,217,253	0	0	24,772,779	0
4.2 Reinsurance assumed		0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded		0	0	0	0	0	0	0	0	0
4.4 Net		226,562,100	67,220,196	1,499,703					24,772,779	0

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

	Claims During t		Claim Reserve at December 31 c		5	6 Estimated Claim
Line of Business	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Reserve and Claim Liability December 31 of Prior Year
Comprehensive (hospital and medical)	208,101,491	1,201,040,600	1,225,495	225,336,605	209,326,986	234,536,553
2. Medicare supplement	57,874,769	283,437,003	84,802	67,135,394	57,959,571	66,656,288
3. Dental only	1,091,390	20,484,619	7,320	1,492,383	1,098,710	1,206,501
4. Vision only	15,692	668,287	104	20,537	15,796	15,796
Federal employees health benefits plan	23,514,227	199,622,797	194,732	30,022,521	23,708,959	25,039,526
6. Title XVIII - Medicare					0	
7. Title XIX - Medicaid					0	
8. Other health	17,465,639	224,407,369	100,826	24,671,953	17,566,465	20,769,496
9. Health subtotal (Lines 1 to 8)	308,063,208	1,929,660,675	1,613,279	348,679,393	309,676,487	348,224,160
10. Healthcare receivables (a)	8,669,481	52,620,686	568	2,983,148	8,670,049	67,948,214
11. Other non-health					0	
12. Medical incentive pools and bonus amounts	20,723,469			18,795,281	20,723,469	18,991,304
13. Totals (Lines 9 - 10 + 11 + 12)	320,117,196	1,877,039,989	1,612,711	364,491,526	321,729,907	299,267,250

⁽a) Excludes \$......0 loans or advances to providers not yet expensed.

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - GRAND TOTAL

	Cumulative Net Amounts Paid								
Year in Which Losses	1	2	3	4	5				
Were Incurred	2014	2015	2016	2017	2018				
1. Prior	281,447	281,731	281,731	281,731	281,731				
2. 2014	1,839,137	2,062,150	2,060,660	2,060,660	2,060,660				
3. 2015	XXX	1,984,986	2,233,748	2,233,384	2,233,384				
4. 2016	XXX	XXX	1,962,851	2,314,314	2,313,564				
5. 2017	XXX	XXX	XXX	1,948,433	2,277,969				
6. 2018	XXX	XXX	XXX	XXX	1,929,661				

SECTION B - INCURRED HEALTH CLAIMS - GRAND TOTAL

		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year								
	Year in Which Losses	1	2	3	4	5				
12	Were Incurred	2014	2015	2016	2017	2018				
<u>.</u> ଜୁ	. Prior	284,243	281,731	281,731	281,731	281,731				
$\exists \mid _{2}$	2014	2,094,150	2,063,497	2,060,660	2,060,660	2,060,660				
3	3. 2015	XXX	2,270,732	2,235,529	2,233,384	2,233,384				
4	2016	XXX	XXX	2,351,684	2,316,304	2,313,564				
5	i. 2017	XXX	XXX	XXX	2,313,658	2,279,582				
6	3. 2018	XXX	XXX	XXX	xxx	2,297,135				

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - GRAND TOTAL

						1		1		
	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expense	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	2,409,437	2,060,660	65,868	3.2	2,126,528	88.3			2,126,528	88.3
2. 2015	2,535,836	2,233,384	65,291	2.9	2,298,675	90.6			2,298,675	90.6
3. 2016	2,656,268	2,313,564	71,120	3.1	2,384,684	89.8			2,384,684	89.8
4. 2017	2,646,943	2,277,969	76,848	3.4	2,354,817	89.0	1,613	17	2,356,447	89.0
5. 2018	2,625,888	1,929,661	67,675	3.5	1,997,336	76.1	367,475	3,778	2,368,589	90.2

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - HOSPITAL AND MEDICAL

	Cumulative Net Amounts Paid								
Year in Which Losses	1	2	3	4	5				
Were Incurred	2014	2015	2016	2017	2018				
1. Prior	196,927	196,773	196,773	196,773	196,773				
2. 2014	1,226,463	1,376,287	1,374,733	1,374,733	1,374,733				
3. 2015	xxx	1,348,437	1,518,852	1,518,128	1,518,128				
4. 2016	xxx	XXX	1,333,953	1,583,146	1,582,557				
5. 2017	XXX	XXX	XXX	1,290,037	1,519,450				
6. 2018	XXX	XXX	XXX	XXX	1,201,041				

SECTION B - INCURRED HEALTH CLAIMS - HOSPITAL AND MEDICAL

		bility, Claim Reserve and Medical Ince	ntive Pool and Bonuses Outstanding at End o	f Year		
	Year in Which Losses	1	2	3	4	5
12	Were Incurred	2014	2015	2016	2017	2018
Ξ	1. Prior	199,287	196,773	196,773	196,773	196,773
Z	2. 2014	1,400,649	1,377,116	1,374,733	1,374,733	1,374,733
	3. 2015	XXX	1,548,138	1,520,200	1,518,128	1,518,128
	4. 2016	XXX	XXX	1,610,468	1,584,362	1,582,557
	5. 2017	XXX	XXX	XXX	1,542,348	1,520,675
	6. 2018	XXX	XXX	XXX	XXX	1,445,173

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - HOSPITAL AND MEDICAL

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	1,603,895	1,374,733	34,433	2.5	1,409,166	87.9			1,409,166	87.9
2. 2015	1,698,974	1,518,128	21,544	1.4	1,539,672	90.6			1,539,672	90.6
3. 2016	1,789,401	1,582,557	26,973	1.7	1,609,530	89.9			1,609,530	89.9
4. 2017	1,751,446	1,519,450	35,799	2.4	1,555,249	88.8	1,225	12	1,556,486	88.9
5. 2018	1,657,118	1,201,041	19,215	1.6	1,220,256	73.6	244,132	2,410	· · ·	88.5

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - MEDICARE SUPPLEMENT

	Cumulative Net Amounts Paid								
Year in Which Losses	1	2	3	4	5				
Were Incurred	2014	2015	2016	2017	2018				
1. Prior	48,805	48,978	48,978	48,978	48,978				
2. 2014	231,721	274,327	274,495	274,495	274,495				
3. 2015	XXX	241,831	287,788	288,224	288,224				
4. 2016	XXX	XXX	248,159	307,356	307,244				
5. 2017	XXX	XXX	XXX	268,987	326,974				
6. 2018	XXX	XXX	XXX	XXX	283,437				

SECTION B - INCURRED HEALTH CLAIMS - MEDICARE SUPPLEMENT

		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year								
	Year in Which Losses	1	2	3	4	5				
12	Were Incurred	2014	2015	2016	2017	2018				
•	1. Prior	48,985	48,978	48,978	48,978	48,978				
SM	2. 2014	278,673	274,465	274,495	274,495	274,495				
	3. 2015	XXX	293,336	287,881	288,224	288,224				
	4. 2016	XXX	XXX	311,312	307,733	307,244				
	5. 2017	XXX	XXX	XXX	335,267	327,059				
	6. 2018	XXX	XXX	XXX	XXX	350,572				

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - MEDICARE SUPPLEMENT

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	347,645	274,495	12,132	4	.4286,627	82.4			286,627	82.4
2. 2015	355,792	288,224	14,524	5	302,748	85.1			302,748	85.1
3. 2016	376,548	307,244	12,740	4	.1319,984	85.0			319,984	85.0
4. 2017	398,149	326,974	13,191	4	.0340,165	85.4	85	1	340,251	85.5
5. 2018	420.781	283.437	12.743	4	.5	70.4	67.135	662	363.977	86.5

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - DENTAL ONLY

	Cumulative Net Amounts Paid								
Year in Which Losses	1	2	3	4	5				
Were Incurred	2014	2015	2016	2017	2018				
1. Prior	854	858	858	858	858				
2. 2014	18,789	19,645	19,651	19,651	19,651				
3. 2015	XXX	19,297	20,305	20,310	20,310				
4. 2016	XXX	XXX	19,217	20,360	20,371				
5. 2017	XXX	XXX	XXX	19,341	20,421				
6. 2018	XXX	XXX	XXX	XXX	20,485				

SECTION B - INCURRED HEALTH CLAIMS - DENTAL ONLY

		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year								
	Year in Which Losses	1	2	3	4	5				
12	Were Incurred	2014	2015	2016	2017	2018				
Ö	1. Prior	854	858	858	858	858				
0	2. 2014	19,831	19,740	19,651	19,651	19,651				
	3. 2015	XXX	20,271	20,309	20,310	20,310				
	4. 2016	XXX	XXX	20,386	20,362	20,371				
	5. 2017	XXX	XXX	XXX	20,546	20,429				
	6. 2018	XXX	XXX	XXX	XXX	21,977				

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - DENTAL ONLY

	1	2	3	4	5	6	7	8	9	10
Years in Which					Claim and Claim Adjustment			Unpaid Claim	Total Claims and Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	26,401	19,651	1,106	5.6	20,757	78.6			20,757	78.6
2. 2015	26,512	20,310	1,476	7.3	21,786	82.2			21,786	82.2
3. 2016	26,399	20,371	1,330	6.5	21,701	82.2			21,701	82.2
4. 2017	26,811	20,421	1,108	5.4	21,529	80.3	7		21,536	80.3
5. 2018	27.763	20.485	1.348	6.6	21,833	78.6	1.492	15	23.340	84.1

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - VISION ONLY

			Cumulative Net Amounts Paid		
Year in Which Losses Were Incurred	1	2	3	4	5
Were Incurred	2014	2015	2016	2017	2018
1. Prior	21	21	21	21	21
2. 2014	513	529	529	529	529
3. 2015	XXX	656	672	672	672
4. 2016	XXX	XXX	640	662	662
5. 2017	XXX	XXX	XXX	683	699
6. 2018	XXX	XXX	XXX	XXX	668

SECTION B - INCURRED HEALTH CLAIMS - VISION ONLY

		Sum of Cum	ulative Net Amount Paid and Claim Lial	bility, Claim Reserve and Medical Incentive	e Pool and Bonuses Outstanding at	t End of Year
_	Year in Which Losses Were Incurred	1	2	3	4	5
12	Were Incurred	2014	2015	2016	2017	2018
-<	1. Prior	21	21	21	21	21
0	2. 2014	530	530	529	529	529
	3. 2015	XXX	671	672	672	672
	4. 2016	XXX	XXX	662	662	662
	5. 2017	XXX	XXX	XXX	699	699
	6. 2018	XXX	XXX	XXX	XXX	689

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - VISION ONLY

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	666	529	41	7	.8570	85.6			570	85.6
2. 2015	743	672	91	13	.5763	102.7			763	102.7
3. 2016	797	662	96	14	.5758	95.1			758	95.1
4. 2017	877	699	31	4	.4730	83.2			730	83.2
5. 2018	915	668	99	14	. 8	83.8	2	1	788	86 1

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - FEDERAL EMPLOYEES HEALTH BENEFITS PLAN PREMIUM

		С	umulative Net Amounts Paid		
Year in Which Losses	1	2	3	4	5
Were Incurred	2014	2015	2016	2017	2018
1. Prior	20,304	20,310	20,310	20,310	20,310
2. 2014	176,086	190,095	189,985	189,985	189,985
3. 2015	XXX	182,299	198,720	198,639	198,639
4. 2016	XXX	XXX	182,742	207,505	207,445
5. 2017	XXX	XXX	XXX	187,901	211,475
6. 2018	XXX	XXX	XXX	XXX	199,623

SECTION B - INCURRED HEALTH CLAIMS - FEDERAL EMPLOYEES HEALTH BENEFITS PLAN PREMIUM

		Sum of Cum	ulative Net Amount Paid and Claim Liabili	ity, Claim Reserve and Medical Ince	ntive Pool and Bonuses Outstanding at End	of Year
_	Year in Which Losses	1	2	3	4	5
12	Were Incurred	2014	2015	2016	2017	2018
Ξ <u>Π</u>	1. Prior	20,482	20,310	20,310	20,310	20,310
Ш	2. 2014	191,606	190,304	189,985	189,985	189,985
	3. 2015	XXX	199,307	198,945	198,639	198,639
	4. 2016	XXX	XXX	211,907	207,777	207,445
	5. 2017	XXX	XXX	XXX	212,668	211,670
	6. 2018	XXX	XXX	XXX	XXX	229,645

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - FEDERAL EMPLOYEES HEALTH BENEFITS PLAN PREMIUM

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	211,242	189,985	10,452	5.	5200,437	94.9			200,437	94.9
2. 2015	220,746	198,639	13,678	6.	9212,317	96.2			212,317	96.2
3. 2016	235,678	207,445	14,559	7.	0222,004	94.2			222,004	94.2
4. 2017	224,908	211,475	11,053	5.	2222,528	98.9	195	3	222,726	99.0
5. 2018	254.604	199.623	17.571	8	8217.194		30.023	448	247.665	97.3

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XVIII - MEDICARE

	Cumulative Net Amounts Paid								
Year in Which Losses Were Incurred	1	2	3	4	5				
Were Incurred	2014	2015	2016	2017	2018				
1. Prior		819	818	8818	818				
2. 2014									
3. 2015	XXX								
4. 2016	XXX	XXX							
5. 2017	XXX	XXX	XXX						
6. 2018	XXX	XXX	XXX	XXX					

SECTION B - INCURRED HEALTH CLAIMS - TITLE XVIII - MEDICARE

		Sum of Cum	ulative Net Amount Paid and Claim Liabilit	y, Claim Reserve and Medical Ince	ntive Pool and Bonuses Outstanding at	t End of Year
_	Year in Which Losses	1	2	3	4	5
12	Were Incurred	2014	2015	2016	2017	2018
×	1. Prior	819	818	818	818	818
<	2. 2014.					
	3. 2015.	XXX				
	4. 2016.	XXX	XXX			
	5. 2017	XXX	XXX	XXX		
	6. 2018	XXX	XXX	XXX	XXX	

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XVIII - MEDICARE

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	332	0		0.0	0	0.0			0	0.0
2. 2015	1	0		0.0	0	0.0			0	0.0
3. 2016		0		0 (0	0.0			0	0.0
4 2017		0		0.0	0	0.0			0	0.0
5. 2018		0		0.0	0	0.0			0	0.0

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XIX - MEDICAID

*=*********									
	Cumulative Net Amounts Paid								
Year in Which Losses		2	3	4	5				
Year in Which Losses Were Incurred	014	2015	2016	2017	2018				
1. Prior	IACIAL								
2. 2014									
3. 2015	XXX								
4. 2016	XXX	XXX							
5. 2017	XXX	XXX	XXX						
6. 2018.	XXX	XXX	XXX	XXX					

SECTION B - INCURRED HEALTH CLAIMS - TITLE XIX - MEDICAID

		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year								
	Year in Which Losses Were Incurred	1	2	3	4	5				
\rightarrow	Were Incurred	2014	2015	2016	2017	2018				
2.)	1 Prior									
	2 2014									
	3. 2015									
	4. 2016	XXX	XXX							
	5. 2017	XXX	XXX	XXX						
	6. 2018	XXX	XXX	XXX	XXX					

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XIX - MEDICAID

Years in Which Premiums were Earned and Claims were Incurred Payments Claim Adjustment Expense Payments On O		1	2	3	4	5	6	7	8	9	10
Premiums were Earned and Claim Adjustment Expense Payments Claim Adjustment Expense Payments Claim Adjustment Expense Payments Claim Adjustment Expense Incurred Col. 5/1) 1. 2014	V . MI. I										
Claims were Incurred Earned Payments Expense Payments (Col. 3/2) Col. 5/1) Unpaid Expenses (Col. 5 + 7 + 8) (Col. 9/1) 1. 2014											
1. 2014. 0<	Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent		Percent	Claims	Adjustment	Expense Incurred	Percent
1. 2014. 0<	Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	N l. 1 + 1	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
	1. 2014		0		0		0.0			0	0.0
	2 2015		0		0.0		0.0			0	0.0
0. 2010			0		0.0	0	0.0			0	0.0
4 2017			0		0.0	0	0.0			0	0.0
5. 2018.							0.0				0.0

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - OTHER

		(Cumulative Net Amounts Paid		
Year in Which Losses	1	2	3	4	5
Were Incurred	2014	2015	2016	2017	2018
1. Prior	13,717	13,973	13,973	13,973	13,973
2. 2014		201,267	201,267	201,267	201,267
3. 2015	xxx	192,466	207,411	207,411	207,411
4. 2016	xxx	XXX	178,140	195,285	195,285
5. 2017	xxx	XXX	XXX	181,484	198,950
6. 2018		XXX	XXX	XXX	224,407

SECTION B - INCURRED HEALTH CLAIMS - OTHER

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year										
_	Year in Which Losses	1	2	3	4	5					
12	Were Incurred	2014	2015	2016	2017	2018					
Ö	1. Prior	13,795	13,973	13,973	13,973	13,973					
Ť	2. 2014	202,861	201,342	201,267	201,267	201,267					
	3. 2015	XXX	209,009	207,522	207,411	207,411					
	4. 2016	XXX	XXX	196,949	195,408	195,285					
	5. 2017	XXX	XXX	XXX	202,130	199,050					
	6. 2018	XXX	XXX	XXX	XXX	249,079					

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - OTHER

	1	2	3	4	4 5		7	8	9	10
					Claim and Claim				Total Claims and	
Years in Which					Adjustment			Unpaid Claim	Claims Adjustment	
Premiums were Earned and	Premiums	Claim	Claim Adjustment	Percent	Expense Payments	Percent	Claims	Adjustment	Expense Incurred	Percent
Claims were Incurred	Earned	Payments	Expense Payments	(Col. 3/2)	(Col. 2 + 3)	(Col. 5/1)	Unpaid	Expenses	(Col. 5 + 7 + 8)	(Col. 9/1)
1. 2014	219,256	201,267	7,704	3.8	208,971	95.3			208,971	95.3
2. 2015	233,068	207,411	13.978	6.7	221,389	95.0			221,389	95.0
3 2016	227.445	195,285	15 422	7.9	210.707	92.6			210.707	92.6
4. 2017	244.752	198,950	15.666	7.0	214.616	07.7	101	1	214.718	87 7
	, -	,	-,		, , , , , , , , , , , , , , , , , , , ,	01.1	101		, -	
5. 2018	264,707	224,407	16,699	7.4	241,106	91.1	24,672	243	266,021	100.5

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Unearned premium reserves	651,792	651,792									
Additional policy reserves (a)	0										
Reserve for future contingent benefits	0										
Reserve for rate credits or experience rating refunds (including \$0 for investment income)	52,244,635	2,290,041				49,954,594					
Aggregate write-ins for other policy reserves	0	0	0	0	0	0	0	0	0		
Totals (gross) Reinsurance ceded	52,896,427	2,941,833	0	0	0	49,954,594	0	0	0		
8. Totals (net) (Page 3, Line 4)	52,896,427	2,941,833	0	0	0	49,954,594	0	0	0		
Present value of amounts not yet due on claims Reserve for future contingent benefits	0										
Aggregate write-ins for other claim reserves	0	0	0	0 .	0	0	0	0	0		
12. Totals (gross)	0	0	0	0	0	0	0	0	0		
13. Reinsurance ceded											
14. Totals (net) (Page 3, Line 7)	0	0	0	0	0	0	0	0	0		
1			DETAILS OF	WRITE-INS		1		1	1		
0501.	0										
0502.	0										
0503	0	0	0	0		0					
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)		0	0		0		0		0		
1101.	0										
1102.	0										
1103.	0										
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0		
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0		

⁽a) Includes \$.....0 premium deficiency reserve.

PART 3 - ANALYSIS OF EXPENSES

	I AILI V - AIII	Claim Adjustm	nent Expenses	3	4	5
		1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1.	Rent (\$13,475,025 for occupancy of own building)	'	1	15,209,182		16.103.200
2.	Salaries, wages and other benefits			104,611,667		151,394,019
3.	Commissions (less \$0 ceded plus \$0 assumed)					67,438,197
4.	Legal fees and expenses					, ,
5.	Certifications and accreditation fees					0
6.	Auditing, actuarial and other consulting services		(5)	844,225		844,220
7.	Traveling expenses	69,288	70,522	1,552,755		1,692,565
8.	Marketing and advertising	104,259	122,731	3,295,870		3,522,860
9.	Postage, express and telephone	627,038	3,349,661	4,525,972		8,502,671
10.	Printing and office supplies	471,029	633,170	2,386,551		3,490,750
11.	Occupancy, depreciation and amortization	478,639	1,628,140	(2,379,800)		(273,021)
12.	Equipment					
13.	Cost or depreciation of EDP equipment and software		2,620,653			22,372,004
14.						109,856,055
15.	Boards, bureaus and association fees		2,648			1,903,332
16.	Insurance, except on real estate		192,217			
17.	Collection and bank service charges					827
18.	Group service and administration fees					17,205,947
19.	Reimbursements by uninsured plans					
20.	Reimbursements from fiscal intermediaries	, , ,	,	,		, ,
21.	Real estate expenses	29,146	108,672	299,937		437,755
22.	Real estate taxes		719,899	2,405,325		3,343,753
23.	Taxes, licenses and fees:	·	·			
	23.1 State and local insurance taxes			20,007		20,007
	23.2 State premium taxes			11,610,228		11,610,228
	23.3 Regulatory authority licenses and fees					981,017
	23.4 Payroll taxes		1,761,351			7,033,436
	23.5 Other (excluding federal income and real estate taxes)			49,010,791		49,010,791
24.	Investment expenses not included elsewhere				5,430,044	5,430,044
25.	Aggregate write-ins for expenses					9,905,924
26.	Total expenses incurred (Lines 1 to 25)		73,054,323			(a)371,353,228
27.	Less expenses unpaid December 31, current year		3,018,162	205,298,196	940,497	210,033,499
28.	Add expenses unpaid December 31, prior year		3,192,081	197,086,294	1,133,467	202,224,837
29.	Amounts receivable relating to uninsured plans, prior year			88,271,839		88,271,839
30.	Amounts receivable relating to uninsured plans, current year			96,651,964		96,651,964
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)		73,228,242	274,238,487	5,623,014	371,924,691
		ILS OF WRITE-INS				
2501	BlueCard Home Access Fees		3,250,214			8,118,068
2502	Miscellaneous Expenses and Reimbursements		1,819,940	(32,084)		1,787,856
2503	·					0
2598	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	4,867,854	5,070,154	(32,084)	0	9,905,924

⁽a) Includes management fees of \$.......0 to affiliates and \$......0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		COME	
		1	2
		Collected	Earned
	HO	During Year	During Year
1.	U.S. government bonds	(a)969,869	1,039,665
1.1	Bonds exempt from U.S. tax.	(a)	
	Other bonds (unaffiliated)		34,378,433
1.3	Bonds of affiliates		
2.1	Preferred stocks (unaffiliated)	(b)15,346	15,346
	Preferred stocks of affiliates	· /	
	Common stocks (unaffiliated)	10,188,899	10,509,411
	Common stocks of affiliates		68,000,000
3.	Mortgage loans	(c)	
4.	Real estate	1, ,	13,475,025
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e)3,926,631	3,952,722
7.	Derivative instruments	(f)40,182	40,182
8.	Other invested assets	118,038	134,243
9.	Aggregate write-ins for investment income	613,355	613,355
10.	Total gross investment income	131,967,619	132,158,383
11.	Investment expenses		(g)5,430,044
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)114,687
14.	Depreciation on real estate and other invested assets.		(i)7,150,092
15.	Aggregate write-ins for deductions from investment income		1,132,878
16.	Total deductions (Lines 11 through 15)		13,827,701
17.	Net investment income (Line 10 minus Line 16)		118,330,682
	DETAILS OF WRITE-INS		
0901.	Miscellaneous Investment Income	517,277	517,277
0902.	Securities Lending	96,078	96,078
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	613,355	613,355
	Other Investment Expenses		
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		1,132,878
(a)	Includes \$7,723,043 accrual of discount less \$12,183,783 amortization of premium and less \$2,284,430 paid for		
(b)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividence	ls on purchases.	
(c)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest	on purchases.	
(d)	Includes \$13,475,025 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrance	S.	
(e)	Includes \$140,527 accrual of discount less \$0 amortization of premium and less \$23,026 paid for accrued in	terest on purchases.	
(f)	Includes \$0 accrual of discount less \$0 amortization of premium.	•	
(g)	Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income taxi	es, attributable to segregated and S	eparate Accounts.
(h)	Includes \$0 interest on surplus notes and \$0 interest on capital notes.	5 5 .	•
(i)	Includes \$7,150,092 depreciation on real estate and \$0 depreciation on other invested assets.		
` '			

	EXHIBI	T OF CAPITA	AL GAINS (L	LOSSES)		
		1	2	3	4	5
		Realized				Change in
		Gain (Loss)	Other	Total Realized	Change in	Unrealized
		on Sales	Realized	Capital Gain (Loss)	Unrealized	Foreign Exchange
		or Maturity	Adjustments	(Columns 1 + 2)	Capital Gain (Loss)	Capital Gain (Loss)
1.	U.S. government bonds				(153,097)	
1.1	Bonds exempt from U.S. tax			0		
1.2	Other bonds (unaffiliated)	(3,877,449)	(1,271,072)	(5,148,520)	(1,064,391)	
1.3	Bonds of affiliates			0		
2.1	Preferred stocks (unaffiliated)	2,928,038	(2,566)	2,925,472	(256,251)	(73,869)
2.11	Preferred stocks of affiliates			0		
2.2	Common stocks (unaffiliated)	51,223,581	(607,279)	50,616,302	(76,065,469)	(4,140,620)
2.21	Common stocks of affiliates			0	(4,391,064)	
3.	Mortgage loans			0		
4.	Real estate			0		
5.	Contract loans			0		
6.	Cash, cash equivalents and short-term investments	(5,651)	(81,423)	(87,074)		
7.	Derivative instruments			0		
8.	Other invested assets	(15,874)	(200,000)	(215,874)	246,945	
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	50,195,818	(2,162,339)	48,033,479	(81,683,327)	(4,247,953)
		DETAILS O	F WRITE-INS			
0901.	Foreign Currency Unrealized Gain / (Loss)			0		(33,464)
0902.				0		
0903.				0		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	0	0	0	(33,464)

EXHIBIT OF NONADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	859,760	979,760	120,000
	2.2 Common stocks			(2,141,651)
3.	Mortgage loans on real estate (Schedule B):	, ,		(, , ,
	3.1 First liens.			0
	3.2 Other than first liens			0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			0
	4.2 Properties held for the production of income			0
	4.3 Properties held for sale			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2)			
J.	and short-term investments (Schedule DA)			0
6.	Contract loans			-
7.	Derivatives (Schedule DB).			0
8.	` '			(658,083)
9.	Other invested assets (Schedule BA)			058,083
10.	Securities lending reinvested collateral assets (Schedule DL)			0
11.	Aggregate write-ins for invested assets		0	
12.	Subtotals, cash and invested assets (Lines 1 to 11)		22,604,056	(2,679,734)
13.	Title plants (for Title insurers only)			0
14.	Investment income due and accrued	43,212	31,500	(11,712)
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection		154,459	154,459
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			0
	15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	50,085	1,751,855	1,701,770
	16.2 Funds held by or deposited with reinsured companies			0
	16.3 Other amounts receivable under reinsurance contracts			0
17.	Amounts receivable relating to uninsured plans			(848,310
	Current federal and foreign income tax recoverable and interest thereon			0
	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit	, ,		0
20.	Electronic data processing equipment and software			1,168,308
21.	Furniture and equipment, including health care delivery assets		-, - ,	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			(72,047)
24.	Health care and other amounts receivable			3,205,091
25.	Aggregate write-ins for other-than-invested assets	87,512,746	70,613,569	(16,899,177)
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)		131,949,238	(20,075,318)
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28.	TOTALS (Lines 26 and 27)	152,024,556	131,949,238	(20,075,318)
	DETAILS OF V	VRITE-INS		
1101				0
1102				0
1103				0
	Summary of remaining write-ins for Line 11 from overflow page			
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			0
	Prepaid Premium Tax Assets			7,096,974
	·	, , , , , ,	-,,	(25,088,716)
	Prepaid Pension Costs			,
	Other Prepaid Expenses			995,253
	Summary of remaining write-ins for Line 25 from overflow page			97,312
2599	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	87,512,746	70,613,569	(16,899,177)

Statement as of December 31, 2018 of the **Wellmark, Inc.**

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

LAHIBH 1 - LINKOL				LOO OILLI			
		,	Total Members at End of			6	
	1	2	3	4	5	Current Year	
	Prior	First	Second	Third	Current	Member	
Source of Enrollment	Year	Quarter	Quarter	Quarter	Year	Months	
Health maintenance organizations							
Provider service organizations							
Preferred provider organizations		892,363	880,632	865,535	865,621	10,541,918	
4. Point of service							
5. Indemnity only		177,150	177,537	178,695	178,877	2,134,627	
Aggregate write-ins for other lines of business		176,402	177,242	177,902	179,288	2,127,885	
7. Total		1,245,915	1,235,411	1,222,132	1,223,786	14,804,430	
	DETAI	LS OF WRITE-INS					
0601. Dental	81,650	81,488	82,383	82,906	84,432	988,851	
0602. Medicare Part D		86,300	86.280	86,446	86.298	1,036,132	
0603. Vision	8.404	8.614	8,579	8,550	8.558	102,902	
	-,	0,014	0,575	0,000	0,000	102,302	
, , ,		U	0	0	0	0	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)		176,402	177,242	177,902	179,288	2,127,885	

Note 1 - Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Wellmark, Inc. (the Company) have been prepared in conformity with the accounting practices prescribed by the National Association of Insurance Commissioners (NAIC) and the State of Iowa.

The NAIC Accounting Practices and Procedures manual has been adopted as a component of prescribed or permitted practices by the State of Iowa. The Commissioner of Insurance has the right to permit specific practices that deviate from prescribed practices. The Company does not have any permitted practices.

	SSAP#	F/S Page	F/S Line #	2018	2017
NET INCOME					•
(1) Wellmark, Inc. state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 127,475,750	\$ 43,089,081
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP				•	
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 127,475,750	\$ 43,089,081
SURPLUS					
(5) Wellmark, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$1,567,303,983	\$1,524,119,468
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$1,567,303,983	\$1,524,119,468

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums on fully insured accident and health plans are billed in advance of their respective coverage periods. Receivables and income for such premiums are recorded at the effective date of the coverage period. Premiums received in advance and any unearned portion of premiums are recorded on the balance sheets as premiums received in advance and unearned premiums and reported as income when earned.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Other costs, such as premium taxes and other underwriting expenses, are also charged to operations as incurred.

Real estate is carried at depreciated cost, less encumbrances. The fair value of real estate owned is determined by an internal analysis and evaluation of relevant market data.

In addition, the Company uses the following accounting policies:

(1) Basis for Short-Term Investments

Short-term investments that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. Short-term investments that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value.

(2) Basis for Bonds and Amortization Schedule

Bonds that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. Bonds that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value. When a decline in the fair value of a bond has been determined to be other than temporary, the Company evaluates whether the decline is interest or credit related. For those credit-related declines in value that are considered to be other than temporary, the bond's carrying value is reduced and a loss is realized on the Statement of Revenues and Expenses. Surplus notes that are rated by an NAIC credit rating provider and have an NAIC designation of 1 are reported at cost, adjusted for amortization of premiums and accretion of discounts using the effective interest method.

The Company does not own any mandatory convertible securities or SVO-Identified investments identified in SSAP No. 26R.

(3) Basis for Common Stocks

Unaffiliated common stocks are reported at fair value. When a decline in the fair value of an unaffiliated common stock is considered to be other than temporary, the carrying value of the stock is reduced to fair value and a loss is realized on the Statement of Revenues and Expenses. The Company has no restricted common stock.

(4) Basis for Preferred Stocks

Redeemable preferred stocks that are NAIC designation 1 or 2 are reported at book value. Perpetual preferred stocks that are NAIC designation 1 or 2 are reported at fair value. Redeemable and perpetual preferred stocks that are NAIC designation 3 through 6 are reported at the lower of book value or fair value.

(5) Basis for Mortgage Loans

Not Applicable

(6) Basis for Loan-Backed Securities and Adjustment Methodology

Loan-backed securities that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. For all securities except for interest only securities or securities where the yield had become negative, the amortization of premiums and accretion of discounts on loan-backed securities is adjusted annually using current estimated future cash flows, including any new prepayment assumptions, using the retrospective adjustment method. Interest only securities and securities where the yield had become negative are valued using the prospective method. Loan-backed securities are stated at the lower of amortized cost or fair value if they are NAIC designation 3 through 6.

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

Common stock of the Company's insurance subsidiaries are recorded at the equity in the underlying statutory basis of their net assets. Common stock of the Company's non-insurance subsidiaries is recorded at their U.S. GAAP equity, but all ownership interests have been nonadmitted at December 31, 2018 as GAAP audited financial statements are not obtained for these subsidiaries.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The Company has ownership interests in two affiliated joint ventures. The Company carries these interests based on the underlying statutory equity of the investees.

The Company also has minor ownership interests in limited liability companies. The Company carries these interests based on the underlying equity of the investee. If a GAAP audited statement is unavailable, the Company considers these investments non-admitted. All ownership interests in limited liability companies have been nonadmitted at December 31, 2018.

The Company has a minor ownership interest in a limited partnership. The Company carries this interest based on the underlying audited GAAP equity of the investee.

(9) Accounting Policies for Derivatives

On occasion, the Company receives stock rights through corporate actions by common stock issuers that are reported as derivatives. The Company does not enter into derivative transactions for hedging, income generation, or replication purposes. All derivatives are reported at fair value.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with Statement of Statutory Accounting Principles (SSAP) 54, Individual and Group Accident and Health Contracts.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses for A&H Contracts

The Company provides a liability for unpaid and unreported benefits, which represents the estimated ultimate cost of benefits incurred through the balance sheet date. The liability is estimated on the basis of past experience and accumulated statistical data. Subsequent actual benefit experience may differ from the estimated liability due to variances in estimated and actual utilization of health care services, the amount of charges and other factors. These estimates are continuously reviewed and, as adjustments become necessary, such adjustments are reflected in current operations.

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

The Company has not modified its capitalization policy from the prior period.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Company estimates pharmaceutical rebates utilizing past experience and accumulated statistical data. These estimates are continuously reviewed, and any adjustments are reflected in current operations.

D. Going Concern

Management has evaluated the Company's ability to continue as a going concern and has concluded that there are no events or circumstances that raise any doubt about the Company's ability to continue as a going concern.

Note 2 – Accounting Changes and Correction of Errors

Not Applicable

Note 3 - Business Combinations and Goodwill

Not Applicable

Note 4 - Discontinued Operations

Not Applicable

Note 5 - Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not Applicable

B. Debt Restructuring

Not Applicable

C. Reverse Mortgages

Not Applicable

D. Loan-Backed Securities

(1) Description of Sources Used to Determine Prepayment Assumptions

For fixed-rate agency mortgage-backed securities, prepayment speeds are calculated utilizing Mortgage Industry Advisory Corporation (MIAC) Mortgage Industry Medians (MIMs). MIMs are derived from a semi-monthly dealer-consensus survey of long-term prepayment projections. For other mortgage-backed, loan-backed, and structured securities, prepayment assumptions are utilized from Moody's Analytics. Moody's applies a flat economic credit model and utilizes a vector of multiple monthly speeds as opposed to a single speed for more robust projections. In instances where Moody's projections are not available, data from Reuters is used, which utilizes the median prepayment speed from contributors' models.

(2) Other-Than-Temporary Impairments

There were no loan-backed securities with a current period recognized other-than-temporary impairment (OTTI) classified on the basis for the OTTI as "Intent to sell" or "Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis."

(3) Recognized OTTI Securities

Loan-backed securities with a current period recognized other-than-temporary impairment, currently held by the Company, as the present value of cash flows expected to be collected is less than the amortized cost basis of the securities follows as of December 31, 2018:

			Book/Adjusted		Danaminad				
			Carrying Value	Present Value of	Recognized Other-Than-		Amortized Cost After		Date of Financial
			Amortized Cost			'			
			Before Current	Projected Cash	Temporary		Other-Than-	Fair Value at	Statement Where
CUSIP			Period OTTI	Flows	Impairment	T	emporary Impairment	Time of OTTI	Reported
12624Q	AS	2	\$ 1,392,886	\$ 1,229,260	\$ 163,627	\$	1,229,260	\$ 961,668	12/31/2018
17311Y	AC	7	\$ 1,450,433	\$ 1,303,421	\$ 147,011	\$	1,303,421	\$ 1,303,421	12/01/2018
12591K	AF	2	\$ 454,284	\$ 374,720	\$ 79,564	\$	374,720	\$ 374,720	12/01/2018
36192B	AA	5	\$ 670,908	\$ 564,218	\$ 106,690	\$	564,218	\$ 490,424	12/31/2018
46640L	AF	9	\$ 231,108	\$ 166,626	\$ 64,482	\$	166,626	\$ 166,626	12/01/2018
46640J	ΑT	4	\$ 164,350	\$ 82,488	\$ 81,862	\$	82,488	\$ 82,488	12/01/2018
30261U	ΑE	4	\$ 130,585	\$ 100,565	\$ 30,019	\$	100,565	\$ 80,268	12/01/2018
92936Y	AK	7	\$ 653,101	\$ 538,777	\$ 114,323	\$	538,777	\$ 390,807	12/31/2018
200474	BD	5	\$ 916,499	\$ 743,057	\$ 173,442	\$	743,057	\$ 662,825	12/01/2018
126281	BB	9	\$ 260,907	\$ 195,744	\$ 65,163	\$	195,744	\$ 182,043	12/01/2018
36250H	AG	8	\$ 776,122	\$ 589,894	\$ 186,228	\$	589,894	\$ 528,984	12/01/2018
92939K	АН	1	\$ 187,175	\$ 139,672	\$ 47,503	\$	139,672	\$ 117,366	12/01/2018
Total			·	·	\$ 1,259,914				_

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a.	The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ 1,962,644
		2. 12 Months or Longer	\$ 2,630,558
b.	The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 108,916,800
		2. 12 Months or Longer	\$ 72,005,223

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

The unrealized losses on the Company's investments in loan-backed securities were due to temporary changes in interest rates and market conditions. The contractual cash flows of the agency mortgage-backed investments are guaranteed by an agency of the U.S. government and the non-agency mortgage-backed and asset-backed securities include collateral which reduce the risk of loss. Based on cash flow projections, the Company believes it will recover the carrying value of these investments. Because the Company does not have the intent to sell these securities, nor is it more likely than not the Company will be required to sell these securities until a recovery of carrying value, which may be maturity, the Company does not consider these investments to be other-than-temporarily impaired.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) Policy for Requiring Collateral or Other Security

The Company participates in a securities lending program through its custodian bank, Bank of New York Mellon (BNYM). On the day the loan is delivered, BNYM obtains collateral equal in amount to 102% for securities of United States issuers and 105% for securities of non-United States issuers of the market value of the securities loaned plus accrued interest. The collateralization of all loans is then reviewed daily during the term of the loan. Cash received as collateral will be held and maintained by BNYM in one of its collective investment vehicles in accordance with investment guidelines provided in the securities lending agreement. Because the Company and BNYM are not permitted by contract to sell or repledge the collateral, the collateral is not recorded on the Company's statutory Balance Sheet.

(2) Disclose the Carrying Amount and Classification of Both Assets and Liabilities

Not Applicable

(3) Collateral Received

Not Applicable

(4) Aggregate Value of the Reinvested Collateral

Not Applicable

(5) Collateral Reinvestment

Not Applicable

(6) Detail on Collateral Transactions Not Permitted by Contract or Custom to Sell or Repledge

The Company accepts collateral through its securities lending program with BNYM that it is not permitted by contract or custom to sell or repledge. As of December 31, 2018, no securities were on loan and no collateral had been accepted.

(7) Collateral for Securities Lending Transactions that Extend Beyond One Year from the Reporting Date

Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company Policies or Strategies for Repo Programs

The Company participates in a repurchase agreement with Bankers Trust (the Bank). The repurchase agreement is an obligation of the Bank to repay the Company the principal amount invested by the Company with interest upon demand by the Company. To secure the obligations under the repurchase agreement, the Bank grants to the Company an undivided security interest in certain United States government securities having a market value equal to at least 102% of the principal amount invested. The United States government securities comprising the collateral are at all times owned by the Bank; therefore, this collateral was not recorded on the Company's statutory Balance Sheet. Since the repurchase agreement matures upon demand, there is no asset-liability mismatch.

(2) Type of Repo Trades Used

	1	2	3	4
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a. Bilateral (YES/NO)	YES	YES	YES	YES
b. Tri-Party (YES/NO	NO	NO	NO	NO

(3) Original (Flow) and Residual Maturity

			First	Quarter		Second Quarter						
		1	2	3	4	5	6	7	8			
				Average Daily	Ending			Average Daily	Ending			
		Minimum	Maximum	Balance	Balance	Minimum	Maximum	Balance	Balance			
a.	Open – No Maturity	\$ 1,650,612	\$24,791,567	\$ 7,941,904	\$ 5,235,114	\$ 1,444,346	\$94,860,969	\$15,236,373	\$47,814,211			
b.	Overnight	\$	\$	\$	\$	\$	\$	\$	\$			
C.	2 Days to 1 Week	\$	\$	\$	\$	\$	\$	\$	\$			
d.	>1 Week to 1 Month	\$	\$	\$	\$	\$	\$	\$	\$			
e.	>1 Month to 3 Months	\$	\$	\$	\$	\$	\$	\$	\$			
f.	>3 Months to 1 Year	\$	\$	\$	\$	\$	\$	\$	\$			
g.	> 1 Year	\$	\$	\$	\$	\$	\$	\$	\$			

			Third	Quarter		Fourth Quarter						
		9	10	11	12	13	14	15	16			
				Average Daily	Ending			Average Daily	Ending			
		Minimum	Maximum	Balance	Balance	Minimum	Maximum	Balance	Balance			
a.	Open – No Maturity	\$	\$38,550,007	\$10,988,003	\$ 5,824,736	\$	\$38,987,020	\$ 9,313,716	\$38,735,563			
b.	Overnight	\$	\$	\$	\$	\$	\$	\$	\$			
C.	2 Days to 1 Week	\$	\$	\$	\$	\$	\$	\$	\$			
d.	>1 Week to 1 Month	\$	\$	\$	\$	\$	\$	\$	\$			
e.	>1 Month to 3 Months	\$	\$	\$	\$	\$	\$	\$	\$			
f.	>3 Months to 1 Year	\$	\$	\$	\$	\$	\$	\$	\$			
g.	> 1 Year	\$	\$	\$	\$	\$	\$	\$	\$			

(4) Counterparty, Jurisdiction and Fair Value (FV)

No securities were sold and/or acquired that resulted in default.

(5) Securities Sold Under Repo – Secured Borrowing

The Company deposits cash into an overnight sweep account. The Bank sweeps cash out of the Company's account and invests these funds into a Repurchase Agreement. The Company has not sold any securities as part of this agreement.

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

The Company deposits cash into an overnight sweep account. The Bank sweeps cash out of the Company's account and invests these funds into a Repurchase Agreement. The Company has not sold any securities as part of this agreement.

(7) Collateral Received - Secured Borrowing

					First	Qι	ıarter			Second Quarter							
			1		2		3	3 4			5	6			7		8
							Average Daily Ending							Α	Average Daily		Ending
			Minimum		Maximum		Balance		Balance		Minimum		Maximum		Balance		Balance
a.	Cash	\$		\$		\$		\$		\$		\$		\$		\$	
b.	Securities (FV)	\$	1,683,624	\$	25,287,741	\$	8,100,742	\$	5,340,128	\$	1,474,084	\$	96,758,627	\$	15,541,100	\$	48,770,527

			Third	Quarter		Fourth Quarter						
		9	10	11	12	13	14	15	16			
				Average Daily	Ending			Average Daily	Ending			
		Minimum	Maximum	Balance	Balance	Minimum	Maximum	Balance	Balance			
a.	Cash	\$	\$	\$	\$	\$	\$	\$	\$			
b.	Securities (FV)	\$	\$ 39,321,196	\$ 11,207,763	\$ 5,942,473	\$	\$ 39,767,522	\$ 9,499,990	\$ 39,510,637			

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation

	1	2	3	4	5	6	7	8 Does Not Qualify as
Ending Balance	None	NAIC 1	NAIC 2	NAIC 3	NAIC 4	NAIC 5	NAIC 6	Admitted
a. Cash	\$	\$	\$	\$	\$	\$	\$	\$
b. Bonds-FV		39,510,637						
c. LB & SS- FV								
d. Preferred Stock- FV								
e. Common Stock								
f. Mortgage Loans- FV								
g. Real Estate- FV								
h. Derivatives- FV								
i. Other Invested Assets- FV								
j. Total Collateral Assets- FV (Sum of a								
through i)	\$	\$ 39,510,637	\$	\$	\$	\$	\$	\$

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

		Fair Value
a.	Overnight and Continuous	\$ 39,510,637
b.	30 Days or Less	\$
C.	31 to 90 Days	\$
d.	>90 Days	\$

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

The Bank holds the collateral for the benefit of the Company during the term of the repurchase agreement. The Company does not have any authority to reinvest the collateral.

(11) Liability to Return Collateral – Secured Borrowing (Total)

The Bank holds the collateral for the benefit of the Company during the term of the repurchase agreement. The Bank retains all rights of ownership in the collateral unless or until a default under the repurchase agreement. As a result, no liability has been recognized on the Company's Balance Sheet.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable

H. Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable

J. Real Estate

Not Applicable

K. Low-Income Housing Tax Credits (LIHTC)

Not Applicable

L. Restricted Assets

Not Applicable

M. Working Capital Finance Investments

Not Applicable

N. Offsetting and Netting of Assets and Liabilities

Not Applicable

O. Structured Notes

Not Applicable

P. 5GI Securities

Not Applicable

Q. Short Sales

Not Applicable

R. Prepayment Penalty and Acceleration Fees

(1)	Number of CUSIPs	7
(2)	Aggregate Amount of Investment Income	\$ 115,448

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of Ownership

As of December 31, 2018, the Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets

B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies

The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships or Limited Liability Companies during 2018 or 2017.

Note 7 - Investment Income

A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

All investment income due and accrued relating to the Company's minor ownership interests in limited liability companies has been nonadmitted, on the basis that the related ownership interests in limited liability companies have been nonadmitted.

B. The total amount excluded:

The total amount excluded at December 31, 2018 was \$43,212.

Note 8 - Derivative Instruments

A. Market Risk, Credit Risk and Cash Requirements

On occasion, the Company receives stock rights through corporate actions by common stock issuers that are reported as derivatives. The Company does not purchase derivatives and has no future cash commitments related to derivatives held.

B. Objectives for Derivative User

On occasion, the Company receives stock rights through corporate actions by common stock issuers that are reported as derivatives. The Company does not enter into derivative transactions for hedging, income generation, or replication purposes.

C. Accounting Policies for Recognition and Measurement

All derivatives are reported at fair value with changes in fair value recorded in surplus. Realized gains and losses upon settlement or expiration of the derivatives are reported in net realized capital gains (losses) on the Statement of Revenue and Expenses.

D. Identification of Whether the Reporting Entity has Derivative Contracts with Financing Premiums

Not Applicable

E. Net Gain or Loss Recognized and Excluded From the Assessment of Hedge Effectiveness

Not Applicable

F. Net Gain or Loss Recognized from Derivatives that no Longer Qualify for Hedge Accounting

Not Applicable

G. Derivatives Accounted for as Cash Flow Hedges

Not Applicable

H. Total Premium Costs for Contracts

Not Applicable

Note 9 – Income Taxes

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

			2018			2017			Change	
		1	2	3	4	5	6	7	8	9
				(Col 1+2)			(Col 4+5)	(Col 1-4)	(Col 2-5)	(Col 7+8)
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
a.	Gross deferred tax assets	\$ 43,949,000	\$ 1,711,000	\$ 45,660,000	\$ 47,985,000	\$ 3,409,000	\$ 51,394,000	\$ (4,036,000)	\$ (1,698,000)	\$ (5,734,000)
b.	Statutory valuation allowance adjustment							,	,	,
C.	Adjusted gross deferred tax assets (1a-1b)	\$ 43,949,000	\$ 1,711,000	\$ 45,660,000	\$ 47,985,000	\$ 3,409,000	\$ 51,394,000	\$ (4,036,000)	\$ (1,698,000)	\$ (5,734,000)
d.	Deferred tax assets nonadmitted	8,151,000		8,151,000				8,151,000		8,151,000
e.	Subtotal net admitted deferred tax asset (1c-1d)	\$ 35,798,000	\$ 1,711,000	\$ 37,509,000	\$ 47,985,000	\$ 3,409,000	\$ 51,394,000	\$(12,187,000)	\$ (1,698,000)	(13,885,000)
f.	Deferred tax liabilities	419,000	9,991,000	10,410,000	13,109,000	27,815,000	40,924,000	(12,690,000)	(17,824,000)	(30,514,000)
g.	Net admitted deferred tax assets/(net deferred									
	tax liability) (1e-1f)	\$ 35,379,000	\$ (8,280,000)	\$ 27,099,000	\$ 34,876,000	\$(24,406,000)	\$ 10,470,000	\$ 503,000	\$ 16,126,000	\$ 16,629,000

2. Admission Calculation Components SSAP No. 101

			2018			2017			Change			
		1	2	3	4	5	6	7	8	9		
				(Col 1+2)			(Col 4+5)	(Col 1-4)	(Col 2-5)	(Col 7+8)		
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total		
a.		\$ 25,093,000	\$ 898,000	\$ 25,991,000	\$ 24,985,000	\$ 1,790,000	\$ 26,775,000	\$ 108,000	\$ (892,000)	\$ (784,000)		
b.	Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	1,108,000		1,108,000				1,108,000		1,108,000		
	Adjusted gross deferred tax assets expected to be realized following the balance sheet	1,100,000		1,100,000				1,100,000		1,100,000		
	date	1,108,000		1,108,000				1,108,000		1,108,000		
	Adjusted gross deferred tax assets allowed per limitation threshold	,,		230,612,000			226,378,000	,		4,234,000		
c.	Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	9,597,000	813,000	10,410,000	23,000,000	1,619,000	24,619,000	(13,403,000)	(806,000)	(14,209,000)		
d.	Deferred tax assets admitted as the result of application of SSAP 101. Total						, ,					
	(2(a)+2(b)+2(c))	\$ 35,798,000	\$ 1,711,000	\$ 37,509,000	\$ 47,985,000	\$ 3,409,000	\$ 51,394,000	\$ (12,187,000)	\$ (1,698,000)	\$ (13,885,000)		

3. Other Admissibility Criteria

		2018	2017
a.	Ratio percentage used to determine recovery period and threshold limitation amount	1,000.3%	1,028.5%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold		
	limitation in 2(b)2 above	\$ 1,540,204,983	\$ 1,513,649,468

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

		2018		2017	,		Change	!	
		1	2	3		4	5		6
			.				(Col. 1-3)		(Col. 2-4)
		Ordinary	Capital	Ordinary		Capital	Ordinary		Capital
1.	Adjusted gross DTAs								
	amount from Note								
	9A1(c)	\$ 43,949,000	\$ 1,711,000	\$ 47,985,000	\$	3,409,000	\$ (4,036,000)	\$	(1,698,000)
2.	Percentage of								
	adjusted gross DTAs								
	by tax character								
	attributable to the								
	impact of tax planning								
	strategies	%	%	%		%	%		%
3.	Net Admitted Adjusted								
	Gross DTAs amount								
	from Note 9A1(e)	\$ 35,798,000	\$ 1,711,000	\$ 47,985,000	\$	3,409,000	\$ (12,187,000)	\$	(1,698,000)
4	Percentage of net								
	admitted adjusted								
	gross DTAs by tax								
	character admitted								
	because of the impact								
	of tax planning						•		
	strategies	%	%	%		%	%		%

⁽b) Does the company's tax planning strategies include the use of reinsurance? NO

B. Deferred Tax Liabilities Not Recognized

The Company does not have any deferred tax liabilities not recognized.

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3 (Col 1-2)
	2018	2017	Change
a. Federal	\$ 26,181,593	\$ 7,926,000	\$ 18,255,593
b. Foreign	\$	\$	\$
c. Subtotal	\$ 26,181,593	\$ 7,926,000	\$ 18,255,593
d. Federal income tax on net capital gains	\$ 8,365,000	\$ 4,163,000	\$ 4,202,000
e. Utilization of capital loss carry-forwards	\$	\$	\$
f. Other	\$	\$	\$
g. Federal and Foreign income taxes incurred	\$ 34,546,593	\$ 12,089,000	\$ 22,457,593

2. Deferred Tax Assets

a. Ord				2	3	
a. Ord		2018		2017	(Col 1-2)	
ia. Oit	linary:		2010	2017	Change	
1.	Discounting of unpaid losses	\$	1,806,000	\$ 1,783,000	\$ 23,000	
	Unearned premium reserve	φ	1,000,000	ψ 1,703,000	\$ 25,000	
3.	Policyholder reserves					
	Investments			82,000	(02,000)	
4.		-		02,000	(82,000)	
	Deferred acquisition costs					
	Policyholder dividends accrual		202.222	070.000	(0.40.000)	
	Fixed assets		362,000	678,000	(316,000)	
	Compensation and benefits accrual		15,734,000	12,979,000	2,755,000	
	Receivables - nonadmitted		3,147,000	4,014,000	(867,000)	
	Net operating loss carry-forward					
	Tax credit carry-forward					
	Other (items <=5% and >5% of total ordinary tax assets)		22,900,000	28,449,000	(5,549,000)	
Oth	er (items listed individually >5%of total ordinary tax assets)					
	Intangible assets at transition date		3,033,000	3,159,000	(126,000)	
	Prepaid assets - nonadmitted		10,791,000	12,194,000	(1,403,000)	
	Invested assets - nonadmitted		5,310,000	4,747,000	563,000	
	Nondeductible guaranty fund assessment			4,307,000	(4,307,000)	
	Nondeductible legal expenses		3,360,000	3,620,000	(260,000)	
	Other - nonadmitted		402,000	422,000	(20,000)	
99.	Subtotal		43,949,000	47,985,000	(4,036,000)	
b. Sta	tutory valuation allowance adjustment					
	nadmitted		8,151,000		8,151,000	
d. Adr	mitted ordinary deferred tax assets (2a99-2b-2c)		35,798,000	47,985,000	(12,187,000)	
	pital:		, ,	, ,		
	Investments	\$	1,711,000	\$ 3,409,000	\$ (1,698,000)	
	Net capital loss carry-forward		.,,	5,100,000	(1,000,000)	
3.	Real estate					
4.	Other (items <=5% and >5% of total capital tax assets)					
	er (items listed individually >5% of total capital tax assets)					
300	ior from noted marriadally - 070 or total dupital tax associa					
99	Subtotal	\$	1,711,000	\$ 3,409,000	\$ (1,698,000)	
	tutory valuation allowance adjustment	Ψ	1,7 1 1,000	Ψ 0,100,000	(1,000,000)	
	nadmitted					
	mitted capital deferred tax assets (2e99-2f-2g)	-	1,711,000	3,409,000	(1,698,000)	
	mitted deferred tax assets (2d+2h)	\$	37,509,000			

3. Deferred Tax Liabilities

	1	2	3 (Col 1-2)		
	2018	2017	Change		
a. Ordinary:					
1. Investments	\$ 209,000	\$	\$ 209,000		
2. Fixed assets	210,000	391,000	(181,000)		
Deferred and uncollected premium					
Policyholder reserves					
5. Other (items <=5% and >5% of total ordinary tax liabilities)		12,718,000	(12,718,000)		
Other (items listed individually >5% of total ordinary tax liabilities)					
Compensation and benefits accrual		8,919,000	(8,919,000)		
99. Subtotal	419,000	13,109,000	(12,690,000)		
b. Capital:					
1. Investments	8,640,000	25,902,000	(17,262,000)		
2. Real estate	1,351,000	1,913,000	(562,000)		
3. Other (Items <=5% and >5% of total capital tax liabilities)					
Other (items listed individually >5% of total capital tax liabilities)					
99. Subtotal	9,991,000	27,815,000	(17,824,000)		
c. Deferred tax liabilities (3a99+3b99)	\$ 10,410,000	\$ 40,924,000	\$ (30,514,000)		
Net Deferred Tax Assets (2i – 3c)	\$ 27,099,000	\$ 10,470,000	\$ 16,629,000		

5. The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the change in nonadmitted assets is reported separately from the change in net deferred income taxes in unassigned surplus):

	12/31/2018		12/31/2017			Change			
	(1)	(2)	(3) (Col 1+2)	(4)	(5)	(6) (Col 4+5)	(7) (Col 1-4)	(8) (Col 2-5)	(9) (Col 7+8)
	Ordinary	Capital	` Total ´	Ordinary	Capital	` Total ´	Ordinary	Capital	` Total ´
Total deferred tax assets	\$43,949,000	\$ 1,711,000	\$ 45,660,000	\$ 47,985,000	\$ 3,409,000	\$ 51,394,000	\$ (4,036,000)	\$ (1,698,000)	\$ (5,734,000)
Total deferred tax liabilities	(419,000)	(9,991,000)	(10,410,000)	(13,109,000)	(27,815,000)	(40,924,000)	12,690,000	17,824,000	30,514,000
Net deferred tax asset (liability)	43,530,000	(8,280,000)	35,250,000	34,876,000	(24,406,000)	10,470,000	8,654,000	16,126,000	24,780,000
Tax effect of unrealized gains						(17,188,000)			
Tax effect of SSAP92/SSAP102					(644,000)				
Change in net deferred income tax					\$ 6,948,000				

On December 22, 2017, the U.S. federal government enacted a tax bill commonly known as the Tax Cuts and Jobs Act (Tax Reform Act). Among other things, the (Tax Reform Act) reduced the U.S. corporate tax rate to 21% for all corporations effective January 1, 2018. The Company remeasured all deferred tax assets and liabilities in accordance with SSAP 101 at December 31, 2017. The Company was not materially impacted by other provisions of the Tax Reform Act. At December 31, 2018, the Company has completed the accounting for all of the enactment-date income tax effects of the Tax Reform Act and did not record an adjustment to the provisional amount recorded as of December 31, 2017.

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

Among the more significant book to tax adjustments were the following:

	12/31/2018
Provision computed at statutory rate	\$ 34,025,000
Change in nonadmitted assets	(2,504,000)
Tax exempt interest deduction	(983,000)
Dividends received deduction, net	(114,000)
100% dividend received from affiliate	(14,280,000)
Other permanent differences	524,000
ACA health insurer fee	8,999,000
§162(m)(6) limitation	2,899,000
Credits generated in current year	(687,000)
Tax rate differential	(455,554)
Deferred only true-up	194,000
Adjustment of prior year's tax	(21,000)
Other	2,147
Totals	27,598,593
Federal and foreign income taxes incurred	26,181,593
Realized capital gains (losses) tax	8,365,000
Change in net deferred income taxes	(6,948,000)
Total statutory income taxes	\$ 27,598,593

- E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits
 - 1. At December 31, 2018, the Company did not have any unused operating loss carryforwards or tax credit carryforwards available to offset against future taxable income.
 - 2. The amount of federal income taxes incurred in the current year and each preceding year that are available for recoupment in the event of future net losses:

	Year	Amounts
2018		\$35,690,000
2017		11,473,000
2016		4,398,000
TOTAL		\$51.561.000

- 3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.
- F. Consolidated Federal Income Tax Return
 - 1. The Company's federal income tax return is consolidated with the following entities:

Wellmark of South Dakota, Inc. Wellmark Health Plan of Iowa, Inc. First Administrators, Inc. Midwest Benefit Consultants, Inc. Wellmark Holdings, Inc.

2. The method of allocation between the companies is subject to a written agreement, approved by the Board of Directors and the Iowa Insurance Division. Allocation is based upon separate return calculations with current credit for net Iosses.

At December 31, 2018 the Company's tax related balance due from subsidiaries was \$24,819,676.

G. Federal or Foreign Federal Income Tax Loss Contingencies:

At December 31, 2018, it is not reasonably possible to determine the Company's amount of tax loss contingencies that will significantly increase or decrease within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT) - RTT owed under the TCJA

Not Applicable

I. Alternative Minimum Tax (AMT Credit)

The Company recognized no AMT credit as a current year recoverable or a deferred tax asset.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A, B, & C. Nature of the Relationships Involved and Transactions

The Company and Wellmark Health Plan of Iowa, Inc. (WHPI), a wholly owned subsidiary, have a management agreement whereby WHPI agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2018 and 2017, these costs were \$81,008,664 and \$84,280,687, respectively. The Company and WHPI also have an intercompany tax sharing arrangement (See Note 9). For 2018 and 2017, the tax related balance due from WHPI under this tax sharing arrangement was \$11,103,294 and \$14,568,324, respectively.

The Company and Wellmark of South Dakota, Inc. (WSD), a wholly owned subsidiary, have an intercorporate service agreement whereby WSD agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2018 and 2017, these costs were \$66,077,823 and \$71,155,530, respectively. The Company and WSD also have an intercompany tax sharing arrangement (See Note 9). For 2018 and 2017, the tax related balance due from WSD under this tax sharing arrangement was \$13,549,520 and \$7,126,575, respectively.

The Company has a revolving credit agreement with both Wellmark Synergy Health, Inc. (WSH) and Wellmark Value Health Plan, Inc. (WVHP), which gives them each line of credit financing in an amount up to \$10,000,000. There were no draws on the credit line by either WSH or WVHP during 2018. There were no outstanding draws by either WSH or WVHP as of December 31, 2018 or 2017.

The Company received a dividend of \$28,000,000 from WHPI in September 2018. The Company also received a dividend of \$40,000,000 from WSD in December 2018.

D. Amounts Due From or To Related Parties

At December 31, 2018, the Company reported \$36,131,163 as amounts due to subsidiaries and affiliates and \$33,005 as amounts due from subsidiaries and affiliates. At December 31, 2017, the Company reported \$46,319,055 as amounts due to subsidiaries and affiliates and \$4,254,464 as amounts due from subsidiaries and affiliates. The terms of the agreements require these amounts to be settled within 30 days.

E. Guarantees or Undertakings

Not Applicable

F. Material Management or Service Contracts and Cost-Sharing Arrangements

The Company has an intercorporate services and investment and management agreement with some of its subsidiaries and affiliates to provide certain management and administrative services.

G. Nature of the Control Relationship

Not Applicable

H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned

Not Applicable

I. Investments in SCA that Exceed 10% of Admitted Assets

The Company owns a 100% interest in WSD, whose carrying value exceeded 10% of the admitted assets of the Company in both 2018 and 2017. The Company carries WSD at its statutory equity, which was \$283,051,803 and \$291,113,382 as of December 31, 2018 and 2017, respectively. At December 31, 2018, WSD's statutory assets and liabilities were \$472,745,060 and \$189,693,257, respectively. At December 31, 2017, WSD's statutory assets and liabilities were \$475,974,370 and \$184,860,988, respectively. Statutory net income for WSD was \$48,730,108 and \$41,039,153 for the years ended December 31, 2018 and 2017, respectively.

J. Investments in Impaired SCAs

Not Applicable

K. Investment in Foreign Insurance Subsidiary

Not Applicable

L. Investment in Downstream Noninsurance Holding Company

Not Applicable

M. All SCA Investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

		Percentage of SCA				
	SCA Entity	Ownership	Gross Amount	Admitted Amount	Nonac	Imitted Amount
a.	SSAP No. 97 8a Entities	·				
		%	\$	\$	\$	
	Total SSAP No. 97 8a Entities	XXX	\$	\$	\$	
b.	SSAP No. 97 8b(ii) Entities					
		%	\$	\$	\$	
	Total SSAP No. 97 8b(ii) Entities	XXX	\$	\$	\$	
C.	SSAP No. 97 8b(iii) Entities					
	Wellmark Holdings, Inc.	100.0%	\$ 44,703	\$	\$	44,703
	First Administrators, Inc.	100.0%	\$ 3,460,698	\$	\$	3,460,698
	Midwest Benefit Consultants, Inc.	100.0%	\$ 3,974,963	\$	\$	3,974,963
	Total SSAP No. 97 8b(iii) Entities	XXX	\$ 7,480,364	\$	\$	7,480,364
d.	SSAP No. 97 8b(iv) Entities					
		%	\$	\$	\$	
	Total SSAP No. 97 8b(iv) Entities	XXX	\$	\$	\$	
e.	Total SSAP No. 97 8b Entities (except 8b(i) entities)					
	(b+c+d)	XXX	\$ 7,480,364	\$	\$	7,480,364
f.	Aggregate Total (a + e)	XXX	\$ 7,480,364	\$	\$	7,480,364

(2) NAIC Filing Response Information

SCA Entity (Should be the same entities as	Type of NAIC	Date of Filing to	NAIC Valuation	NAIC Response Received	NAIC Disallowed Entities Valuation Method Resubmission	
shown in M(1) above)	Filing*	the NAIC	Amount	Y/N	Required Y/N	Code**
a. SSAP No. 97 8a Entities			•			
			\$			
Total SSAP No. 97 8a Entities	XXX	XXX	\$	XXX	XXX	XXX
b. SSAP No. 97 8b(ii) Entities						
			\$			
Total SSAP No. 97 8b(ii) Entities	XXX	XXX	\$	XXX	XXX	XXX
c. SSAP No. 97 8b(iii) Entities						
Wellmark Holdings, Inc.	S1	10/25/2016	\$	Υ	N	N/A
First Administrators, Inc.	S1	10/25/2016	\$	Υ	N	N/A
Midwest Benefit Consultants, Inc.	S1	10/25/2016	\$	Υ	N	N/A
Total SSAP No. 97 8b(iii) Entities	XXX	XXX	\$	XXX	XXX	XXX
d. SSAP No. 97 8b(iv) Entities						
			\$			
Total SSAP No. 97 8b(iv) Entities	XXX	XXX	\$	XXX	XXX	XXX
e. Total SSAP No. 97 8b Entities (except 8b(i) entities)						
(b+c+d)	XXX	XXX	\$	XXX	XXX	XXX
f. Aggregate Total (a + e)	XXX	XXX	\$	XXX	XXX	XXX

^{*} S1 – Sub-1, S2 – Sub-2 or RDF – Resubmission of Disallowed Filing

The Company is exempt from a Sub-2 filing for its SSAP 97 8b(iii) subsidiaries because they are fully nonadmitted.

N. Investment in Insurance SCAs

Not Applicable

O. SCA Loss Tracking

Not Applicable

Note 11 – Debt

A. Debt Including Capital Notes

During 2018, the Company made amendments to change the available balance on some of its lines of credit. After these amendments, the total amount available to the Company under all lines of credit is \$120,000,000. The Company did not draw on its lines of credit during 2018.

B. FHLB (Federal Home Loan Bank) Agreements

^{**} I – Immaterial or M – Material

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

The Company sponsors a pension program covering substantially all employees of the Company and its subsidiaries. The pension program contains both a defined benefit and cash balance plan available to eligible employees depending on the date of hire. The defined benefit pension plan benefits are based on years of service and the employee's highest five consecutive years' compensation in the last ten years of service. Under the cash balance plan employees earn annual credits based on a percentage of salary which are accumulated in an account that earns interest annually. The pension plan assets are held in the Non-Contributory Retirement Program for Certain Employees of Wellmark, Inc. Trust (Trust) with Prudential Bank & Trust, F.S.B. as the trustee. The recordkeeping responsibilities are performed by Prudential Retirement Insurance and Annuity Company (Prudential). The funding policy is to contribute amounts to the plan sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security Act of 1974 and the Pension Protection Act of 1996, plus additional amounts as determined to be appropriate from time to time.

The Company also sponsors a postretirement health care benefit program. The program has two separate benefit plan calculations available to employees depending on the date of hire. One plan contributes toward the cost of health care premiums based on years of service and is available to employees who retire from the Company who have at least ten years of service and have attained age 65 while in service to the Company. This plan also includes a life insurance benefit based on the employee's annual salary at retirement and is available to employees who retire from the Company who have at least five years of service and have attained age 55 while in service to the Company. The second plan option allows employees to accumulate annual credits in an account that earns interest annually and can be used to pay for health care premiums when the employee becomes Medicare eligible. The Company has not funded either the postretirement health care or life insurance plans, but intends to meet the obligations of the plans through general assets of the Company.

A summary of assets, obligations and assumptions of the Pension and Other Postretirement Benefit Plans are as follows at December 31, 2018 and 2017:

(1) Change in Benefit Obligation

Una	inge ir	Benefit Obligation				
			Overfunded		Underfunded	
			2018	2017	2018	2017
a.	Pen	sion Benefits				
	1.	Benefit obligation at beginning of year	\$ 320,505,868	\$	\$	\$ 295,124,039
	2.	Service cost	11,062,696			10,380,588
	3.	Interest cost	11,795,259			12,537,613
	4.	Contribution by plan participants				
	5.	Actuarial (gain) loss	(21,415,072)			29,708,950
	6.	Foreign currency exchange rate changes				
	7.	Benefits paid	22,869,665			2,268,437
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				24,976,885
	10.	Benefit obligation at end of year	\$ 299,079,086	\$	\$	\$ 320,505,868
			Overfunded		Underfunded	
b.	Pos	tretirement Benefits	2018	2017	2018	2017
	1.	Benefit obligation at beginning of year	\$	\$	\$ 36,173,351	\$ 33,869,270
	2.	Service cost			1,563,863	1,402,329
	3.	Interest cost			1,301,655	1,368,386
	4.	Contribution by plan participants				
	5.	Actuarial (gain) loss			(3,109,194)	694,478
	6.	Foreign currency exchange rate changes			, ,	
	7.	Benefits paid			1,233,198	1,161,112
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year	\$	\$	\$ 34,696,477	\$ 36,173,351
			Overfunded		Underfunded	
C.	Spe	cial or Contractual Benefits per SSAP No. 11	2018	2017	2018	2017
	1.	Benefit obligation at beginning of year	\$	\$	\$ 8,440,445	\$ 8,995,188
	2.	Service cost			21,188,428	17,798,153
	3.	Interest cost				
	4.	Contribution by plan participants				
	5.	Actuarial (gain) loss				
	6.	Foreign currency exchange rate changes				
	7.	Benefits paid			20,278,339	18,352,896
	8.	Plan amendments				-
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year	\$	\$	\$ 9,350,534	\$ 8,440,445

(2) Change in Plan Assets

		Pension Benefits			Postretirement Benefits				Special or Contractual Benefits per SSAP No. 11		
		2018		2017	2018		2017		2018		2017
a.	Fair value of plan assets at beginning of year	\$ 302,978,428	\$	286,134,011	\$	\$		\$		\$	
b.	Actual return on plan assets	(15,940,961)		44,089,739							
C.	Foreign currency exchange rate changes										
d.	Reporting entity contribution	60,000,000									
e.	Plan participants' contributions										
f.	Benefits paid	22,869,665		2,268,437							
g.	Business combinations, divestitures and settlements			24,976,885							
h.	Fair value of plan assets at end of year	\$ 324,167,802	\$	302,978,428	\$	\$		\$		\$	

(3) Funded Status

				Pension	Bene	fits		Postretirement	Benef	fits
		2018		2018	2017			2018		2017
a.	Con	nponents	<u> </u>		•		•		•	
	1.	Prepaid benefit costs	\$	145,976,908	\$	96,617,860	\$		\$	
	2.	Overfunded plans assets	\$	(120,888,192)	\$	(96,617,860)	\$		\$	
	3.	Accrued benefit costs	\$		\$		\$	34,406,379	\$	32,204,999
	4.	Liability for pension benefits	\$		\$	17,527,440	\$	290,098	\$	3,968,352
b.	Ass	ets and liabilities recognized								
	1.	Assets (nonadmitted)	\$	25,088,716	\$		\$		\$	
	2.	Liabilities recognized	\$		\$	17,527,440	\$	34,696,477	\$	36,173,351
C.	Unr	ecognized liabilities	\$		\$		\$		\$	

(4) Components of Net Periodic Benefit Cost

		Pension Benefits			Postretirement	t B	Senefits	Special or Contractual Benefits per SSAP No. 11			
		2018		2017	2018		2017		2018		2017
a.	Service cost	\$ 11,062,696	\$	10,380,588	\$ 1,563,863	\$	1,402,329	\$	21,188,428	\$	17,798,153
b.	Interest cost	11,795,259		12,537,613	1,301,655		1,368,386				
C.	Expected return on plan assets	(22,360,397)		(17,926,882)							
d.	Transition asset or obligation										
e.	Gains and losses	9,942,007		11,931,176							
f.	Prior service cost or credit	201,387		217,675	569,060		569,060				
g.	Gain or loss recognized due to a settlement curtailment			8,832,968							
h.	Total net periodic benefit cost	\$ 10,640,952	\$	25,973,138	\$ 3,434,578	\$	3,339,775	\$	21,188,428	\$	17,798,153

(5) Amounts in Unassigned Funds (Surplus) Recognized as Components of Net Periodic Benefit Cost

		Pension	Ben	efits	Postretirement	Bene	fits
		2018		2017	2018		2017
a.	Items not yet recognized as a component of net periodic cost – prior year	\$ 114,145,300	\$	131,581,026	\$ 3,968,352	\$	3,842,934
b.	Net transition asset or obligation recognized						
C.	Net prior service cost or credit arising during the period						
d.	Net prior service cost or credit recognized	(201,387)		(217,675)	(569,060)		(569,060)
e.	Net (gain) and loss arising during the period	16,886,286		3,546,093	(3,109,194)		694,478
f.	Net gain and (loss) recognized	(9,942,007)		(20,764,144)			
g.	Items not yet recognized as a component of net periodic cost – current period	\$ 120,888,192	\$	114,145,300	\$ 290,098	\$	3,968,352

(6) Amounts in Unassigned Funds (Surplus) Expected to be Recognized in the Next Fiscal Year as Components of Net Periodic Benefit Cost

		Pension Benefits					Postretirement Benefits			
		2018	3	2	017		2018		2017	
a.	Net transition asset or obligations	\$		\$		\$		\$		
b.	Net prior service cost or credit	\$	102,473	\$	201,387	\$	569,060	\$	569,060	
C.	Net recognized (gains) and losses	\$ 10,	612,684	\$	9,376,578	\$	(420)	\$		

(7) Amounts in Unassigned Funds (Surplus) that have not yet been Recognized as Components of Net Periodic Benefit Cost

		Pension Benefits					Postretirement Benefits			
			2018		2017		2018		2017	
a.	Net transition asset or obligations	\$		\$		\$		\$		
b.	Net prior service cost or credit	\$	598,391	\$	799,778	\$	3,167,609	\$	3,736,669	
C.	Net recognized (gains) and losses	\$	120,289,801	\$	113,345,522	\$	(2,877,511)	\$	231,683	

(8) Weighted-Average Assumptions Used to Determine Net Periodic Benefit Cost as of December 31

Pension Benefits

		2018	2017
a.	Weighted-average discount rate	3.8%	4.4%
b.	Expected long-term rate of return on plan assets	6.5%	6.5%
C.	Rate of compensation increase	3.5 - 8.0%	3.5 - 8.0%
Wei	ghted-average assumptions used to determine projected benefit obligations as of December 31		
d.	Weighted-average discount rate	4.5%	3.8%
e.	Rate of compensation increase	3.5 - 8.0%	3.5 - 8.0%

Postretirement Benefits

		2018	2017
a.	Weighted-average discount rate	3.7%	4.2%
b.	Expected long-term rate of return on plan assets	N/A	N/A
C.	Rate of compensation increase	3.5 - 8.0%	3.5 - 8.0%
Wei	ghted-average assumptions used to determine projected benefit obligations as of December 31		
d.	Weighted-average discount rate	4.3%	3.7%
e.	Rate of compensation increase	3.5 - 8.0%	3.5 - 8.0%

(9) Accumulated Benefit Obligation for Defined Benefit Pension Plans

The amount of the accumulated benefit obligation for the defined benefit pension plan was \$256,598,329 for the current year and \$271,948,637 for the prior year.

(10) For Postretirement Benefits Other Than Pensions, the Assumed Health Care Cost Trend Rate(s)

For postretirement benefits other than pensions, for measurement purposes, 8.50% (pre-65) and 8.50% (post-65) annual rates of increase in the per capita cost of covered health care benefits were assumed for 2018. These rates grade down annually to 4.75% for 2028 and beyond.

(11) Assumed health care cost trend rates have a significant effect on the amounts reported for the health care plans. A one-percentage point change in assumed health care cost trend rates would have the following effects:

		11	Percentage Point Increase	1 Percentage Point Decrease
a.	Effect on total of service and interest cost components	\$	53,593	\$ (41,154)
b.	Effect on postretirement benefit obligation	\$	331,328	\$ (273,602)

(12) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the year indicated:

Pension Benefits

	Year(s)	Amount				
a.	2019	\$ 20,794,000				
b.	2020	\$ 21,979,000				
C.	2021	\$ 23,077,000				
d.	2022	\$ 22,798,000				
e.	2023	\$ 23,384,000				
f.	2024 through 2028	\$ 121,267,000				

Postretirement Benefits

	Year(s)	Ar	mount
a.	2019	\$	1,947,000
b.	2020	\$	2,081,000
C.	2021	\$	2,191,000
d.	2022	\$	2,139,000
e.	2023	\$	2,244,000
f.	2024 through 2028	\$	12,902,000

(13) Estimate of Contributions Expected to be Paid to the Plan

The Company does not have any regulatory contribution requirements for 2019. In addition, there are no current plans for the Company to make voluntary contributions to the defined benefit pension plan in 2019.

(14) Amounts and Types of Securities Included in Plan Assets

Not Applicable

(15) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses

Not Applicable

(16) Substantive Comment Used to Account for Benefit Obligation

Not Applicable

(17) Cost of Providing Special or Contractual Termination Benefits Recognized

(18) Significant Change in the Benefit Obligation or Plan Assets

The Company contributed \$60,000,000 to the pension plan in the first quarter of 2018.

(19) Amount and Time Plan Assets Expected to be Returned

There are no plan assets expected to be returned to the employer during the 12-month period following December 31, 2018.

(20) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans

The Company contributed \$60,000,000 to the pension plan in 2018, resulting in the pension plan being in an overfunded status at December 31, 2018. As required by SSAP 102, overfunded plan assets are nonadmitted. The pension plan was in an underfunded status at December 31, 2017. The impact to surplus to recognize the unfunded status of the pension plan was \$17,527,440 at December 31, 2017. The Company has not funded either the postretirement health care or life insurance plans. The impact to surplus to recognize the unfunded status of the Other Postretirement Benefit Plans was \$290,098 and \$3,968,352 at December 31, 2018 and 2017, respectively.

(21) Full Transition Surplus Impact of SSAP 102

Not Applicable

B. Investment Policies and Strategies

The Company's pension plan assets are invested in the Trust. The investment program for the Trust is based on the precepts of capital market theory that are generally accepted and followed by institutional investors, who by definition are long-term oriented investors. This philosophy holds that:

- Increasing risk is rewarded with compensating returns over time and therefore, prudent risk taking is justifiable for long term investors.
- (2) Risk can be controlled through diversification of asset classes and investment approaches as well as diversification of individual securities.
- (3) Risk is reduced by time, and over time the relative performance of different asset classes is reasonably consistent. Over the long-term, equity investments have provided and should continue to provide superior returns over other security types. Fixed-income securities can dampen volatility and provide liquidity in periods of depressed economic activity. Lengthening duration of fixed income securities may reduce surplus volatility.
- (4) The strategic or long-term allocation of assets among various asset classes is an important driver of long term returns.
- (5) Relative performance of various asset classes is unpredictable in the short-term and attempts to shift tactically between asset classes are unlikely to be rewarded.

Investments will be made for the sole interest of the participants of the pension plan participating in the Trust. Accordingly, the assets of the Trust shall be invested in accordance with these objectives:

- (1) To seek and maintain an adequate funded status with regard to current liabilities within a targeted range.
- (2) To manage overall costs of running the pension plan at levels favorable to industry benchmarks.
- (3) To ensure assets are available to meet current and future benefit and expense obligations when due.

C. Fair Value of Plan Assets

(1) Fair Value Measurements of Plans Assets at Reporting Date

Description for each class of plan assets	(Level	1)	(Level 2)	(Level 3)	Total
Common/collective trusts	\$	Ç	\$	\$	\$
Equity accounts	\$	Ş	89,601,462	\$	\$ 89,601,462
Multi-asset accounts	\$		9,820,024	\$	\$ 9,820,024
Mutual funds	\$	()	\$	\$	\$
Equity funds	\$ 37,	041,670	\$	\$	\$ 37,041,670
Fixed income funds	\$ 39,	213,305	\$	\$	\$ 39,213,305
Pooled separate accounts	\$		\$	\$	\$
Fixed income accounts	\$	()	\$ 54,979,840	\$	\$ 54,979,840
Short-term account	\$	()	2,806,137	\$	\$ 2,806,137
Total Plan Assets	\$ 76,	254,975	157,207,463	\$	\$ 233,462,438

Pension plan assets also include \$80,878,973 of hedge funds where fair value is measured at net asset value per share as a practical expedient and \$9,826,391 of limited partnerships which are accounted for under the equity method.

(2) Valuation Technique(s) and Inputs Used to Measure Fair Value

Generally Level 1 financial instruments consist of U.S. domestic equity securities and mutual funds that are actively traded and have quoted prices available. Mutual funds are valued at the Net Asset Value (NAV) of shares held based on the latest quoted market price. Financial instruments included in Level 2 consist of common/collective trusts and pooled separate accounts that have direct or indirect price inputs that are observable in active markets or are measured at NAV. The fair value of the hedge funds is estimated using NAV as a practical expedient. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. The Company obtains prices and/or relevant inputs to fair value calculations from external investment managers or from the custodian of the pension assets, which uses a third party pricing service. For securities not actively traded, the investment manager and/or pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, benchmark yields, credit spreads, default rates, prepayment conditions, and nonbinding broker quotes. Additionally, for investments that do not have quoted market prices whereby fair value is measured using NAV per share as a practical expedient, inputs used in the valuation methodologies also include redemption frequency and redemption notice periods, to give consideration to liquidity constraints, if applicable.

D. Basis Used to Determine Expected Long-Term Rate-of-Return

The basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the Trust invests in and the Trust's target asset allocation.

The assumed target asset allocation for the program is as follows: 44% equity securities, 47% debt securities, 4% cash and cash equivalents, and 5% other securities. Portfolio expectations were estimated through a combination of underlying asset assumptions including geometric returns, distributions, and correlations. Using these assumptions over a 20 year time horizon under the target asset allocation, 25th to 75th percentile range of annual rates of return is 5.3% - 8.1%.

The Company selected the expected return on asset assumption of 6.50% for 2018. This rate is net of both investment and other administrative expenses charged to the Trust.

E. Defined Contribution Plans

The Company sponsors a defined contribution plan, which is qualified under Section 401(k) of the Internal Revenue Code. The plan covers substantially all employees of the Company and subsidiaries. Employees can contribute up to 80% of their annual salary (up to the elective deferral limits set by the Commissioner of Internal Revenue) to the plan. The Company will contribute an amount equal to 100% of the first 4% of salary contributed by the employee. The plan also provides for additional employer contributions at the discretion of the Board of Directors. The Company's contribution for this plan was \$3,639,574 and \$3,710,080 for 2018 and 2017, respectively.

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

The Company is the plan sponsor of a pension program and a postretirement health and life benefit program which cover substantially all employees of the consolidated group.

H. Postemployment Benefits and Compensated Absences

Not Applicable

Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

On December 8, 2003, the Medicare Prescription Drug, Improvement and Modernization Act of 2003 (Act) was signed into law. The Act allows employers who offer actuarially equivalent prescription drug benefits to retirees to receive a federal subsidy starting in 2006. The Company plans to return any subsidy received to retirees in the form of higher postretirement welfare benefits. Therefore, the effects of the subsidy are not reflected in the measurement of the accumulated postretirement benefit obligation or the net periodic benefit cost.

Note 13 – Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) Number of Shares and Par or Stated Value of Each Class

Not Applicable

(2) Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues

Not Applicable

(3) Dividend Restrictions

Not Applicable

(4) Dates and Amounts of Dividends Paid

Not Applicable

(5) Profits that may be Paid as Ordinary Dividends to Stockholders

Not Applicable

(6) Restrictions Plans on Unassigned Funds (Surplus)

Not Applicable

(7) Amount of Advances to Surplus not Repaid

Not Applicable

(8) Amount of Stock Held for Special Purposes

Not Applicable

(9) Reasons for Changes in Balance of Special Surplus Funds from Prior Period

The balance in special surplus funds for the prior year is due to the reclassification from unassigned surplus to special surplus funds, as required under SSAP 106, for the amount the Company anticipated it would pay for its 2018 health insurance provider fee. Nothing was reclassified from unassigned surplus to special surplus in the current year due to the suspension of the fee for 2019 under H.R. 195 Legislation signed by President Trump on January 22, 2018.

(10) The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is: \$447,133.804.

(11) The Reporting Entity Issued the Following Surplus Debentures or Similar Obligations

Not Applicable

(12) The Impact of any Restatement Due to Prior Quasi-Reorganizations

Not Applicable

(13) Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization

Not Applicable

Note 14 - Liabilities, Contingencies and Assessments

A. Contingent Commitments

(1) The Company is required by licensure requirements of the Blue Cross Blue Shield Association (BCBSA) to execute parental guarantees for its licensed controlled affiliates, pursuant to which the Company guarantees to the full extent of its assets all contractual and financial obligations of WHPI, WSD, FAI, WSH and WVHP to their respective customers. Also, the Company, as the parent of WHPI is required by the lowa Insurance Division to guarantee the obligations of WHPI to pay for services to enrollees up to \$1,100,000.

Through parental guarantees executed between the Company and its joint venture companies WSH and WVHP, the Company guarantees that WSH and WVHP are in compliance with the lowa statutory minimum for HMO capital and surplus of \$1,000,000 or the statutory minimum for risk-based capital for health organizations, whichever is greater.

(2) Detail of Other Contingent Commitments

Not Applicable

(3) Guarantee Obligations

Not Applicable

B. Assessments

(1) Assessments Where Amount is Known or Unknown

The Company is subject to health related assessments by the Iowa Comprehensive Health Association and the Iowa Individual Health Benefit Reinsurance Association for high risk insurance pools. The Company accrued net admitted receivables of \$2,870,000 for estimated health related assessments to be returned to the Company at December 31, 2018.

The National Organization of Life & Health Insurance Guaranty Associations (NOLHGA) is an association consisting of the state life and health insurance guaranty organizations. State life and health insurance guaranty organizations, working with NOLHGA, provide a safety net for their state's policyholders, ensuring that they continue to receive coverage even if their insurer is declared insolvent. On March 1, 2017, the Pennsylvania Insurance Commissioner filed an order to place long-term care insurance carrier Penn Treaty Network America Insurance Company and its subsidiary American Network Insurance Company, or collectively Penn Treaty, into liquidation. The Company and other insurers are required to pay a portion of their policyholder claims through state guaranty association assessments.

For the year-ended December 31, 2017, the Company recognized the estimated portion of the assessment for Penn Treaty of \$25,770,000 into expense. The Company's guaranty fund payable is \$14,326,052 and \$20,511,970 as of December 31, 2018 and 2017, respectively. The assessment will be recoverable through premium tax offsets.

(2) Assessments

Reconciliation of assets recognized from paid and accrued premium tax offsets and policy surcharges related to the Penn Treaty assessment:

a.	Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end	\$ 23,270,000
b.	Decreases current period:	
C.	Increases current period:	
d.	Assets recognized from paid and accrued premium tax offsets and policy surcharges current period	\$ 23,270,000

(3) Guaranty Fund Liabilities and Assets Related to Assessments from Insolvencies for Long-Term Care Contracts

Discount rate applied for guaranty fund liability
 Discount rate applied for related asset

3.9% 3.5%

b. The undiscounted and discounted amount of the guaranty fund assessments and related assets by insolvency:

	Guaranty Fund	sessment	Related Assets				
Name of the Insolvency	Undiscounted		Discounted		Undiscounted		Discounted
Penn Treaty Network America Insurance Company	\$ 40,806,052	\$	14,326,052	\$	25,770,000	\$	23,270,000

c. Number of jurisdictions, ranges of years used to discount and weighted average number of years of the discounting time period for payables and recoverables by insolvency:

		Payables		Recoverables						
Name of the Insolvency	Number of Jurisdictions	Range of Years	Weighted Average Number of Years	Number of Jurisdictions	Range of Years	Weighted Average Number of Years				
Penn Treaty Network America										
Insurance Company	1	1 - 26	11	1	1 - 5	2				

C. Gain Contingencies

Not Applicable

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - Total SSAP 97 and SSAP 48 Contingent Liabilities

Not Applicable

E. Joint and Several Liabilities

Not Applicable

F. All Other Contingencies

The Company contracts with an unaffiliated company to handle data processing needs. Charges to the Company, after allocation of a portion of the costs to subsidiaries and affiliates, amounted to approximately \$8,598,000 in 2018. Future minimum payments through December 31, 2025, expiration date of the contract, total approximately \$23,940,000. In addition, such payments are subject to annual adjustments based upon policyholder count and other volume factors. The Company also contracts with another unaffiliated company for products and services. Charges to the Company, after allocation of a portion of the costs to subsidiaries and affiliates, amounted to approximately \$8,416,000 in 2018. Future minimum payments through December 31, 2032, the expiration date of this contract, total approximately \$108,961,000 for this contract.

The Company has agreements with various vendors for services and equipment in connection with the Company's disaster recovery site. Future minimum payments through August 9, 2022, expiration date of the longest agreement, total approximately \$2,442,000.

In the ordinary course of business, the Company is involved in and subject to claims, contractual disputes and other uncertainties, which the Company defends vigorously.

While the ultimate outcome of any other claims cannot be presently determined, in the opinion of management, adequate provision has been made for any potential losses which may result from these actions and the Company expects any liability that could result will not materially affect its financial position.

Note 15 - Leases

- A. Lessee Operating Lease
 - (1) Lessee's Leasing Arrangements
 - a. Rental Expense

The Company leases office space, parking facilities and equipment under various noncancelable operating lease agreements that expire through December 2023. Rental expense associated with these lease arrangements was approximately \$468,000 and \$705,000 for 2018 and 2017, respectively.

b. Basis on Which Contingent Rental Payments are Determined

Not Applicable

c. Existence and Terms of Renewal or Purchase Options and Escalation Clauses

Certain rental commitments have renewal options extending through the year 2033. Some of these renewals are subject to adjustments in future periods.

d. Restrictions Imposed by Lease Agreements

Not Applicable

e. Identification of Lease Agreements that have been Terminated Early

- (2) Leases with Initial or Remaining Noncancelable Lease Terms in Excess of One Year
 - a. At December 31, 2018 the minimum aggregate rental commitments are as follows:

Yea	r Ending December 31	Operating Leases					
1.	2019	\$	705,918				
2.	2020	\$	703,509				
3.	2021	\$	671,925				
4.	2022	\$	577,695				
5.	2023	\$	534,765				
6.	Total	\$	3,193,812				

b. Total of Minimum Rentals to be Received in the Future under Noncancelable Subleases

Not Applicable

(3) For Sale-Leaseback Transactions

Not Applicable

B. Lessor Leases

Not Applicable

Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

Not Applicable

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not Applicable

B. Transfer and Servicing of Financial Assets

Not Applicable

- C. Wash Sales
 - (1) Description of the Objectives Regarding These Transactions

During the year, the Company's external investment managers entered into several transactions that met wash sale criteria. The transactions occurred as a result of reallocation of funds.

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the year ended December 31, 2018 and reacquired within 30 days of the sale date are:

		NAIC	Number of	Book Value of	-	Cost of Securities	
	Description	Designation	Transactions	Securities Sold		Repurchased	Gain/(Loss)
(Common Stock - Industrial & Miscellaneous		5	\$ 1,356,619	\$	822,869	\$ (76,655)

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

Not Applicable

B. ASC Plans

The gain or loss from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2018:

		ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a.	Gross reimbursement for medical cost incurred	\$ 1,067,281,914	\$ 1,368,992,272	\$ 2,436,274,186
b.	Gross administrative fees accrued	43,702,444	87,082,465	130,784,909
C.	Other income or expenses (including interest paid to or received from plans)	10,110	115,384	125,494
d.	Gross expenses incurred (claims and administrative)	1,127,743,105	1,471,282,419	2,599,025,524
e.	Total net gain or loss from operations	\$ (16,748,637)	\$ (15,092,298)	\$ (31,840,935)

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

Reimbursements from Centers for Medicare and Medicaid Services (CMS) for the Company's participation in the Medicare Part D program for the year ended December 31, 2018 were \$46,228,273. This amount represents pharmacy benefit cost reimbursements for the Reinsurance Subsidy and Low-Income Cost Sharing Subsidy elements of the Medicare Part D program.

At December 31, 2018, the Company has a receivable of \$789,695 from CMS for these reimbursements and has recorded a payable of \$4,464,734 for pre-funded amounts received from CMS not applied to benefit payments.

During the year, the Company returned a net amount of \$3,203,664 for prior year pre-funded amounts received from CMS not applied to benefit payments.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Note 20 - Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

5							Net Asset Value		-
Description for Each Type of Asset or Liability		Level 1		Level 2		Level 3	(NAV)		Total
Assets at Fair Value							•		
Cash Equivalents	\$		\$		\$		\$	\$	
Exempt MM Mutual Fund	\$	14,208,626	\$		\$		\$	\$	14,208,626
Sweep Account	\$		\$	38,735,563	\$		\$	\$	38,735,563
Bonds	\$		\$		\$		\$	\$	
Political Subdivision	\$		\$	1,463,129	\$		\$	\$	1,463,129
Special Rev./Assess. Oblig.	\$		\$	963,298	\$		\$	\$	963,298
Industrial & Miscellaneous	\$		\$	11,508,587	\$		\$	\$	11,508,587
Bank Loans	\$		\$	17,697,655	\$		\$	\$	17,697,655
Preferred Stock	\$		\$		\$		\$	\$	
Industrial & Miscellaneous	\$	756,802	\$		\$		\$	\$	756,802
Common Stock	\$		\$		\$		\$	\$	
Industrial & Miscellaneous	\$	321,817,922	\$		\$	4,355,435	\$	\$	326,173,357
Mutual Funds	\$	44,640,171	\$		\$		\$	\$	44,640,171
Total	\$	381,423,521	\$	70,368,232	\$	4,355,435	\$	\$	456,147,188
Liabilities at Fair Value									
	\$		\$		\$		\$	\$	
Total	\$		\$		\$		\$	\$	

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

				Total Gains and	Total Gains and					
	Beginning			(Losses)	(Losses)					
	Balance at	Transfers Into	Transfers Out	Included in Net	Included in				Settle-	Ending Balance
Description	1/1/2018	Level 3	of Level 3	Income	Surplus	Purchases	Issuances	Sales	ments	at 12/31/2018
a. Assets										
Common Stock - Industrial										
& Miscellaneous	\$ 3,865,158	\$	\$	\$	\$ 490,277	\$	\$	\$	\$	\$ 4,355,435
Total	\$ 3,865,158	\$	\$	\$	\$ 490,277	\$	\$	\$	\$	\$ 4,355,435
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Policies when Transfers Between Levels are Recognized

The Company recognizes transfers between fair value hierarchy levels at the end of the reporting period. During the reporting period, foreign currency denominated, publicly traded preferred and common stocks were transferred from Level 2 to Level 1 based on a detailed review of the pricing inputs and management judgment.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

Bonds, structured securities, and surplus notes are reported within Level 2 of the fair value hierarchy; all of these securities have direct or indirect price inputs that are observable in active markets. Fair values of these fixed income instruments are based on quoted market prices where available. The Company obtains at least one price from a third party pricing service or its custodian, which also uses a pricing service. In most instances, the Company obtains more than one price and evaluates between the pricing sources for any outliers or stale prices. Assuming prices are not stale and are reasonable between sources, the Company uses a pre-established hierarchy to conclude on which pricing source to utilize.

The pricing services normally derive security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, benchmark yields, credit spreads, default rates, prepayment conditions, and nonbinding broker quotes.

Level 3 financial instruments include privately held stocks whose fair values have been determined analytically by the NAIC Securities Valuation Office or estimated by management utilizing information provided by the respective companies who have issued the stock in the absence of readily ascertainable fair market values.

(5) Fair Value Disclosures

Not Applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Statutory guidance requires the disclosure of fair values for certain other financial instruments for which it is practicable to estimate fair value, whether or not such values are recognized in the statements of assets, liabilities, capital and surplus. The carrying amounts for cash, receivable for securities, accrued investment income, premium receivables, other receivables, amounts due to/from affiliates, unearned premiums, accounts payable and accrued expenses, and certain other liabilities approximate fair value because of the short-term nature of these items.

C. Fair Value Level

	Aggregate Fair					Net Asset Value	Not Practicable
Type of Financial Instrument	Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
Cash Equivalents	\$ 59,067,409	\$ 59,067,316	\$ 14,208,626	\$ 44,858,783	\$	\$	\$
Short-Term Investments	\$ 13,434,737	\$ 13,432,227	\$	\$ 13,434,737	\$	\$	\$
Bonds	\$ 892,195,483	\$ 877,978,768	\$	\$ 892,195,483	\$	\$	\$
Preferred Stock	\$ 756,802	\$ 756,802	\$ 756,802	\$	\$	\$	\$
Common Stock	\$ 370,813,528	\$ 370,813,528	\$ 366,458,093	\$	\$ 4,355,435	\$	\$
Other Invested Assets	\$ 848,469	\$ 619,475	\$	\$ 848,469	\$	\$	\$

D. Not Practicable to Estimate Fair Value

Not Applicable

E. NAV Practical Expedient Investments

Not Applicable

Note 21 - Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring Debtors

Not Applicable

C. Other Disclosures

Assets in the amount of \$5,752,984 at December 31, 2018 were committed to purchase mortgage-backed securities in 2019.

D. Business Interruption Insurance Recoveries

Not Applicable

E. State Transferable and Non-Transferable Tax Credits

Not applicable

- F. Subprime Mortgage Related Risk Exposure
 - (1) Description of the Subprime-Mortgage-Related Risk Exposure and Related Risk Management Practices

The Company's investment policy, approved by the Board of Directors, requires the use of high quality fixed income investments to cover its contractual liabilities. The investment policy requires that the Company's fixed income portfolio, excluding non-agency mortgage-backed securities, have a minimum average quality rating of BBB+ and the total of below investment grade securities, excluding non-agency mortgage-backed securities, is limited to 10% of the total portfolio. Further, no single issue, with the exception of US Government and Agency securities, can exceed 5% of an external investment manager's portfolio at time of purchase. The Company allows certain external investment managers to purchase non-agency mortgage-backed securities, and credit quality of those securities is at manager discretion with NAIC designation 1 or 2 preferred. The Company utilizes its strategic and tactical asset allocation to manage risk exposure, through allocations to various external investment managers with varying mandates.

The Company's exposure to subprime mortgages at December 31, 2018 is 1.9% of its total portfolio. The Company is receiving principal and interest payments on the subprime mortgage securities, and the Company does not require sale of these types of assets to meet future cash flow requirements. These securities are in gross unrealized gain and loss positions of \$4,636,705 and \$290,123, respectively, as of December 31, 2018. While no single definition exists for subprime, these securities are considered higher risk and carry higher than prime rates of interest. In addition to the interest rates, the Company considers the FICO scores below 660, level of documentation, evidence of delinquency, foreclosure, judgments or bankruptcy and other factors that limit the borrower's ability to service the debt when determining if a security should be classified as subprime.

(2) Direct Exposure Through Investments in Subprime Mortgage Loans

Not Applicable

(3) Direct Exposure Through Other Investments

		Actual Cost	Book/Adjusted Carrying Value (Excluding Interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a.	Residential mortgage-backed securities	\$ 36,380,913	\$ 39,333,480	\$ 43,691,052	\$ 147,011
b.	Commercial mortgage-backed securities				
C.	Collateralized debt obligations				
d.	Structured securities	1,207,450	1,197,824	1,186,835	
e.	Equity investments in SCAs*				
f.	Other assets				
g.	Total	\$ 37,588,363	\$ 40,531,304	\$ 44,877,887	\$ 147,011

^{*} These investments comprise 0% of the company's invested assets.

(4) Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage Not Applicable

Retained Assets G.

Not Applicable

H. Insurance-Linked Securities (ILS) Contracts

Not Applicable

Note 22 - Events Subsequent

Type I - Recognized Subsequent Events:

Subsequent events have been considered through February 18, 2019 for the statutory statement issued on February 28, 2019.

Type II - Nonrecognized Subsequent Events:

Subsequent events have been considered through February 18, 2019 for the statutory statement issued on February 28, 2019.

In 2018, the Company was subject to an annual fee under section 9010 of the federal Affordable Care Act (ACA). This annual fee is allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for the calendar year beginning on or after January 1 of the year the fee is due. As of December 31, 2017, the Company had written health insurance subject to the ACA assessment, expected to conduct health insurance business in 2018, and estimated their portion of the health insurance industry fee payable on September 30, 2018 to be \$46,400,000. This amount was reflected in special surplus in 2017. The actual amount of the fee paid in 2018 was \$42,850,412.

The annual health insurance fee has been suspended for 2019 under the H.R. 195 Legislation signed by President Trump on January 22, 2018. Due to the suspension of the fee for 2019, no amount has been reclassified from unassigned surplus to special surplus in 2018; and no premiums written in 2018 are subject to the the ACA section 9010 assessment. The fee was also suspended for 2017, and therefore, no ACA assessment was paid in 2017.

Did the reporting entity write accident and health insurance premium that is subject to Section 9010 A.

A.	of the Federal Affordable Care Act (YES/NO)?			Yes [X] N	No []
			2018	2017	
B.	ACA fee assessment payable for the upcoming year	\$		\$ 46,400,00	0
С	ACA fee assessment paid	\$	42,850,412	\$	
D.	Premium written subject to ACA 9010 assessment	\$		\$ 2,043,721,16	1
E.	Total adjusted capital before surplus adjustment (Five-Year Historical Line 14)	\$	1,567,303,983		
F.	Total adjusted capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above)	\$	1,567,303,983		
G.	Authorized control level (Five-Year Historical Line 15)	\$	153,973,624		
H.	Would reporting the ACA assessment as of December 31, 2018 have triggered an RBC action level (YES/NO)?	?	Yes[] No	[X]o

Would reporting the ACA assessment as of December 31, 2018 have triggered an RBC action level (YES/NO)?

Yes [] No [X]

Note 23 - Reinsurance

Ceded Reinsurance Report

Section1 - General Interrogatories

- (1) Are any of the reinsurers listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company? Yes [] No [X]
- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business? Yes [] No [X]

Section 2 - Ceded Reinsurance Report - Part A

- Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? Yes [] No [X]
- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? Yes [] No [X]

Section 3 - Ceded Reinsurance Report - Part B

What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate.

Not Applicable

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? Yes [] No [X]
- B. Uncollectible Reinsurance

C. Commutation of Ceded Reinsurance

Not Applicable

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. Method Used to Estimate Accrued Retrospective Premium Adjustments

The Company's participation in the Medicare Part D program includes a risk sharing provision with CMS. The Company estimates accrued retrospective premium adjustments for its Medicare Part D products through a prescribed formula approach. CMS adjusts its payments to the Company based on how actual benefit costs varied from the costs anticipated in the Company's bid for the Medicare Part D products. At December 31, 2018, the Company had three prior years remaining to be settled with CMS for the Medicare Part D products. The risk sharing amounts relating to all other prior years have been settled with CMS.

The Company estimates accrued retrospective premium adjustments for individuals, small groups and large groups according to retrospective rating features pursuant to the medical loss ratio rebate requirements subject to the Public Health Service Act.

B. Retrospective Premiums Recorded Through Written Premium or Adjustment to Earned Premium

The Company records accrued retrospective premium as an adjustment to earned premium.

C. Amount and Percentage of Net Premiums Written Subject to Retrospective Rating Features

The amount of net premiums written by the Company at December 31, 2018 that are subject to retrospective rating features was \$1,944,833,669, which represented 74.4% of the total net premiums written for the Company. No other net premiums written by the Company are subject to retrospective rating features.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

The Company estimates no medical loss ratio rebates required pursuant to the Public Health Services Act at December 31, 2018.

- E. Risk Sharing Provisions of the Affordable Care Act
 - (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act Risk Sharing Provisions

Yes [X] No []

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year:

a. Pe	Permanent ACA Risk Adjustment Program								
Assets									
1.	Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)	\$	8,148,658						
Liabilitie	Liabilities								
2.	Risk adjustment user fees payable for ACA Risk Adjustment	\$	102,159						
3.	Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)	\$							
Operation	ons (Revenue & Expenses)								
4.	Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk								
	Adjustment	\$	6,928,996						
5.	Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)	\$	100,125						

b. Transitional ACA Reinsurance Program	AMOUNT
Assets	
Amounts recoverable for claims paid due to ACA Reinsurance	\$
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	\$
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	\$
Liabilities	
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	\$
5. Ceded reinsurance premiums payable due to ACA Reinsurance	\$
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$
Operations (Revenue & Expenses)	
7. Ceded reinsurance premiums due to ACA Reinsurance	\$
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$
ACA Reinsurance contributions – not reported as ceded premium	\$

C.	Temporary ACA Risk Corridors Program	AMOUNT							
Asse	Assets								
	Accrued retrospective premium due to ACA Risk Corridors	\$							
Liabil	Liabilities								
	2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	\$							
Oper	Operations (Revenue & Expenses)								
	3. Effect of ACA Risk Corridors on net premium income (paid/received)	\$							
	4. Effect of ACA Risk Corridors on change in reserves for rate credits	\$							

(3) Roll forward of prior year ACA Risk Sharing Provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance:

						Differences		Adjustments		Ref	Unsettled as of the	Balances Reporting Date
		Business	Year on Written Dec. 31 of	Received or the Current Business Before the Prior 3 Receivable	Year on Written Dec. 31 of	Prior Year Accrued Less Payments (Col. 1-3) 5 Receivable	Prior Year Accrued Less Payments (Col. 2-4) 6 (Payable)	To Prior Year Balances 7 Receivable	To Prior Year Balances 8 (Payable)		Cumulative Balance from Prior Years (Col. 1-3+7) 0 Receivable	Cumulative Balance from Prior Years (Col. 2-4+8) 10 (Payable)
a.	Permanent ACA	Receivable	(Fayable)	Receivable	(Fayable)	Receivable	(Fayable)	Receivable	(Fayable)		Receivable	(Fayable)
	Risk Adjustment Program 1. Premium adjustments											
	receivable (including high risk pool											
	payments)	\$ 14,500,000	\$	\$ 13,117,561	\$	\$ 1,382,439	\$	\$ (790,781)	\$	Α	\$ 591,658	\$
	Premium adjustments (payable) (including high risk pool premium)											
	Subtotal ACA											
	Permanent Risk Adjustment											•
b.	Program Transitional ACA	\$ 14,500,000	\$	\$ 13,117,561	\$	\$ 1,382,439	\$	\$ (790,781)	\$	<u> </u>	\$ 591,658	\$
U.	Reinsurance Program											
	1. Amounts											
	recoverable for claims paid	\$ 1,751,855	\$	\$ 1,701,770	\$	\$ 50,085	\$	\$	\$		\$ 50,085	\$
	Amounts recoverable for claims unpaid											
	(contra liability)											
	Amounts receivable											
	relating to uninsured plans 4. Liabilities for											
	4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premiums											
	5. Ceded reinsurance											
	premiums payable											
	Liability for amounts held under uninsured plans											
	7. Subtotal ACA Transitional Reinsurance Program	\$ 1,751,855	\$	\$ 1,701,770	\$	\$ 50,085	\$	\$	\$		\$ 50,085	\$
C.	Temporary ACA Risk Corridors Program	, - ,				,		,				
	1. Accrued retrospective	•	•					c				•
	premium 2. Reserve for rate credits or policy	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
	experience rating refunds 3. Subtotal ACA											
	Risk Corridors Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
d.	Total for ACA Risk Sharing Provisions	\$ 16,251,855	\$	\$ 14,819,331	\$	\$ 1,432,524	\$	\$ (790,781)	\$		\$ 641,743	\$

Explanations of Adjustments

Revised data received.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Not Applicable

(5) ACA Risk Corridors Receivable as of Reporting Date

Not Applicable

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

The Company's reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years have decreased by \$38,710,876 from \$352,229,236 in 2017. Because unpaid losses are estimated based on past experience and accumulated statistical data, the Company's actual benefit payments have varied from the original estimates.

B. Information about Significant Changes in Methodologies and Assumptions

There have been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

Note 26 - Intercompany Pooling Arrangements

Not Applicable

Note 27 - Structured Settlements

Not Applicable

Note 28 - Health Care Receivables

A. Pharmaceutical Rebate Receivables

	Estimated Pharmacy	Pharmacy Rebates as	Actual Rebates	Actual Rebates	Actual Rebates
	Rebates as Reported on	Billed or Otherwise	Received Within 90	Received Within 91 to	Received More than
Quarter	Financial Statements	Confirmed	Days of Billing	180 Days of Billing	180 Days After Billing
12/31/2018	\$ 26,502,453	\$	\$	\$	\$
09/30/2018	\$ 24,724,046	\$ 20,704,708	\$ 4,111,089	\$	\$
06/30/2018	\$ 24,414,684	\$ 23,842,814	\$	\$ 23,168,905	\$
03/31/2018	\$ 25,028,463	\$ 24,643,203	\$	\$ 22,929,202	\$ (19,772)
12/31/2017	\$ 25,693,417	\$ 26,557,344	\$	\$ 25,971,543	\$ 1,123,406
09/30/2017	\$ 24,313,827	\$ 24,414,991	\$	\$ 23,502,278	\$ 595,370
06/30/2017	\$ 24,559,257	\$ 18,675,206	\$ 4,445,399	\$ 19,204,834	\$ 341,847
03/31/2017	\$ 22,579,338	\$ 24,438,006	\$	\$ 21,638,715	\$ 904,172
12/31/2016	\$ 23,705,008	\$ 21,112,025	\$	\$ 21,819,846	\$ 5,182,810
09/30/2016	\$ 22,775,836	\$ 23,974,091	\$	\$ 19,813,162	\$ 7,456,382
06/30/2016	\$ 22,479,117	\$ 17,365,473	\$	\$ 19,232,424	\$ 6,709,940
03/31/2016	\$ 19,301,217	\$ 22,795,255	\$	\$ 17,315,497	\$ 7,309,362

B. Risk Sharing Receivables

Not Applicable

Note 29 - Participating Policies

Not Applicable

Note 30 – Premium Deficiency Reserves

1. Liability carried for premium deficiency reserve: \$0

2. Date of most recent evaluation of this liability: <u>January 18, 2019</u>

3. Was anticipated investment income utilized in the calculation? Yes [X] No []

Note 31 - Anticipated Salvage and Subrogation

PART 1 - COMMON INTERROGATORIES

GENERAL

1.3 State regulating? lowa 1.4 Is the reporting entity publicly traded or a member of publicly traded group? 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? 2.2 If yes, date of change: 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 3.4 By what department or departments?		No [] Yes [] Yes [X 03/05/20 12/31/20 06/29/20	No[]
1.3 State regulating? lowa 1.4 Is the reporting entity publicly traded or a member of publicly traded group? 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? 2.2 If yes, date of change: 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 3.4 By what department or departments?		Yes [] Yes [X 03/05/20 12/31/20	No [X] No [] 18 16
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Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? If yes, date of change: State as of what date the latest financial examination of the reporting entity was made or is being made. State he as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). By what department or departments? lowa Insurance Division		03/05/20 12/31/20 12/31/20	18 16
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3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 3.4 By what department or departments? lowa Insurance Division		12/31/20 12/31/20	16
3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). By what department or departments? lowa Insurance Division		12/31/20	
This date should be the date of the examined balance sheet and not the date the report was completed or released. 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 3.4 By what department or departments? lowa Insurance Division	_		16
the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 3.4 By what department or departments? lowa Insurance Division 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial		06/29/20	10
 10wa Insurance Division 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial 		00/23/20	18
3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial			
statement filed with departments?			
	es[]	No[]	N/A [X]
	es[]	No[]	N/A [X]
4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:			
4.11 sales of new business?		Yes[]	No [X]
4.12 renewals?		Yes[]	No [X]
4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:			
4.21 sales of new business?		Yes[]	No [X]
4.22 renewals?		Yes []	No [X]
Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If the answer is YES, complete and file the merger history data file with the NAIC.		Yes []	No [X]
 If yes, provide the name of entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation. 			
1	2	2	3
	NA Comp		State of
Name of Entity	Con	. ,	Domicile
 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information: 		Yes[]	No [X]
7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?		Yes[]	No [X]
7.2 If yes,			
7.21 State the percentage of foreign control			%
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).			
1			
Nationality Type of Entity			
		Yes []	No [X]
8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? 8.2 If responds to 8.1 is yes, please identify the name of the bank holding company.			
8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.			
		Yes[]	No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 		Yes[]	No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance 		Yes[]	No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 	4	Yes []	No [X]
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8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 8.4 If the response to 8.1 is yes, please identify the name and insurance of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? 8.4 Ernst & Young LLP, 801 Grand Avenue, Des Moines, IA 50309 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements	-	5	6
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? Ernst & Young LLP, 801 Grand Avenue, Des Moines, IA 50309 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? 	-	5	6
8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 8.4 If the response to 8.1 is yes, please identify the name and insurance of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? 8.4 Ernst & Young LLP, 801 Grand Avenue, Des Moines, IA 50309 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements	-	5 FDIC	6 SEC
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 If response to 8.1 is yes, please identify the name of the bank holding company. Is the company affiliated with one or more banks, thrifts or securities firms? If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 1 2 3 Affiliate Name Location (City, State) FRB What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? Ernst & Young LLP, 801 Grand Avenue, Des Moines, IA 50309 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? If the response to 10.1 is yes, provide information related to this exemption: 	OCC	5 FDIC	6 SEC

PART 1 - COMMON INTERROGATORIES

10.6	If the response to 10.5 is no or n/a, please explain:			
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? _Daniel J. Callahan, Senior Actuary, FSA, MAAA (employee), 1331 Grand Avenue, Des Moines, IA 50309-2901			
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? 12.11 Name of real estate holding company 12.12 Number of parcels involved		Yes []	No [X]
	12.13 Total book/adjusted carrying value	\$		0
12.2	If yes, provide explanation			
13. 13.1	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY: What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?			
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?		Yes[]	No []
13.3 13.4	Have there been any changes made to any of the trust indentures during the year? If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes[]	Yes[] No[]	No [] N/A []
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar	103[]		
	functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationship (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;	s;	Yes [X]	No []
	 (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and 			
	(e) Accountability for adherence to the code.			
14.11	If the response to 14.1 is no, please explain:			
14.2 14.21	Has the code of ethics for senior managers been amended? If the response to 14.2 is yes, provide information related to amendment(s).		Yes[]	No [X]
14.3	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes []	No [X]
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).			
15.1	Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?		Yes[]	No [X]
15.2	If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.	,,		
	1 2 3 American Bankers Association (ABA) Routing Number Issuing or Confirming Bank Name the Letter of Credit		4 Amount	
		\$		
	BOARD OF DIRECTORS			
16. 17. 18.	Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof? Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part		Yes [X] Yes [X]	No [] No []
10.	of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? FINANCIAL		Yes [X]	No []
19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?		Yes[]	No [X]
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):			
	20.11 To directors or other officers 20.12 To stockholders not officers	\$ e		0
	20.13 Trustees, supreme or grand (Fraternal only)	\$ \$		0
20.2	Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):	<u></u>		
	20.21 To directors or other officers	\$		0
	20.22 To stockholders not officers			0
21.1	20.23 Trustees, supreme or grand (Fraternal only) Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation			0
	being reporting in the statement?		Yes []	No [X]
21.2	If yes, state the amount thereof at December 31 of the current year: 21.21 Rented from others	¢		0
	21.22 Reflect from others 21.22 Borrowed from others	\$ \$		0
	21.23 Leased from others	\$		0
	21.24 Other	\$		0
22.1	Does this statement include payments for assessments as described in the <i>Annual Statement Instructions</i> other than guaranty fund or guaranty association assessments?		Yes [X]	No []
22.2	If answer is yes: 22.21 Amount paid as losses or risk adjustment	\$	9,68	37,344
	22.22 Amount paid as expenses	\$		0
	22.23 Other amounts paid	\$		0
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?		Yes [X]	No []
23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$		0

PART 1 - COMMON INTERROGATORIES

INVESTMENT

24.01		the stocks, bonds and other securities owned Decemi ual possession of the reporting entity on said date (of				sive control,		Yes[X]	No[]
24.02		e full and complete information, relating thereto:	ulei ulali se	curiles lending programs address	eu III 24.00)!			165[7]	NO[]
24.02	ii iio, give	train and complete information, relating thereto.							
24.03	The Com BNYM of value of collateral securities	rity lending programs, provide a description of the pro is carried on or off-balance sheet (an alternative is to apany participates in a securities lending program the otains collateral equal in amount to 102% for securities securities loaned plus accrued interest. The colember securities loaned plus accrued interest. The colember securities lending agreement. Prior to the close of business for December 31, 2018, no securities were on loan.	o reference rough its co ies of Unite llateralization ts collective	Note 17 where this information is a ustodian bank, Bank of New York ad States issuers and 105% for se on of all loans is then reviewed da investment vehicles in accordan	also provided). Mellon (BNYM). curities of non-Ur ally during the terr ce with the inves	On the day the loan ited States issuers of the loan. Cas tment guidelines present the contract of the contract	of the market h received as rovided in the		
24.04	Does the	company's security lending program meet the require	ements for	a conforming program as outlined	in the Risk-Based	Capital Instructions	? Yes [X]	No []	N/A []
24.05	If answe	r to 24.04 is yes, report amount of collateral for confo	rming prog	rams.			\$		0
24.06	If answe	r to 24.04 is no, report amount of collateral for other p	orograms				\$		0
24.07		ır securities lending program require 102% (domestic	securities)	and 105% (foreign securities) from	the counterparty	at the outset			
	of the cor						Yes [X]	No []	N/A []
24.08		reporting entity non-admit when the collateral receive				N. A.) .	Yes []	No[]	N/A [X]
24.09.		reporting entity or the reporting entity's securities len- securities lending?	ding agent	utilize the Master Securities Lendii	ng Agreement (M	SLA) to	Yes [X]	No []	N/A []
24.10		eporting entity's security lending program, state the ar	mount of th	e following as of December 31 of t	ne current vear		100[11]	110[]	
		Total fair value of reinvested collateral assets reported		•	io carront years		\$		0
		Total book adjusted/carrying value of reinvested colla		•	and 2:		\$		0
		Total payable for securities lending reported on the lia					\$		0
25.1		of the stocks, bonds or other assets of the reporting			ear not exclusively	v under the control	<u>*</u>		
20.1	of the rep	porting entity or has the reporting entity sold or transfe							
		s subject to Interrogatory 21.1 and 24.03.)						Yes [X]	No []
25.2	•	ate the amount thereof at December 31 of the current	year:						
		Subject to repurchase agreements					\$	38,7	35,563
		Subject to reverse repurchase agreements					\$		0
		Subject to dollar repurchase agreements					\$		0
	25.24	Subject to reverse dollar repurchase agreements					\$		0
	25.25	Placed under option agreements					\$		0
	25.26	Letter stock or securities restricted as sale – excluding	ng FHLB Ca	apital Stock			\$		0
	25.27	FHLB Capital Stock					\$		0
	25.28	On deposit with states					\$		0
	25.29	On deposit with other regulatory bodies					\$		0
	25.30	Pledged as collateral – excluding collateral pledged	to an FHLE	}			\$		0
	25.31	Pledged as collateral to FHLB – including assets bad	cking fundir	ig agreements			\$		0
		Other					\$		0
25.3	For cate	gory (25.26) provide the following:					<u> </u>		
		1			2			3	
		Nature of Restriction		Des	cription			Amount	t
							\$		
26.1	Does the	reporting entity have any hedging transactions report	ted on Sch	edule DB?				Yes []	No [X]
26.2		s a comprehensive description of the hedging program	m been ma	de available to the domiciliary state	e?		Yes []	No []	N/A [X]
	ir no, atta	ch a description with this statement.							
27.1	Were any	y preferred stocks or bonds owned as of December 3	1 of the cur	rent year mandatorily convertible in	nto equity, or, at th	e option of the issu	er,		
		le into equity?		,	, ,, ,	•		Yes []	No [X]
27.2	If yes, sta	ate the amount thereof at December 31 of the current	year:				\$		0
28.	offices, v	g items in Schedule E-Part 3-Special Deposits, real es aults or safety deposit boxes, were all stocks, bonds a agreement with a qualified bank or trust company in	and other s	ecurities, owned throughout the cu	rrent year held pu	rsuant to a	ng		
		Functions, Custodial or Safekeeping Agreements of						Yes [X]	No []
	28.01	For agreements that comply with the requirements of	the NAIC	Financial Condition Examiners Hai	ndbook, complete	the following:			
		1 Name of Custo	odian(s)			Custodia	2 an's Address		
		The Bank of New York Mellon			BNY Mellon Cen	iter, 500 Grant Stree	et, Pittsburgh, PA 1	5258	
		Bankers Trust Company			453 7th Street, D	Des Moines, IA 503	09		
		For all agreements that do not comply with the requir	ements of	he NAIC Financial Condition Exam	niners Handbook,	provide the name,			
		location and a complete explanation		2			3	-	
		Name(s)		Location(s)		Complete	S Explanation(s)		
						22p.010	r = ====(0)		
	28.03	Have there been any changes, including name chang	ges, in the	custodian(s) identified in 28.01 dur	ing the current ver	 ar?		Yes []	No [X]
		If yes, give full and complete information relating ther	-	(-)	J			·- []	[]
		1		2		3		4	
		Old Custodian		New Custodian		Date of Change	Re	eason	

PART 1 - COMMON INTERROGATORIES

28 05 Investment management - Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts", "... handle securities"].

1	2
Name of Firm or Individual	Affiliation
NISA Investment Advisors, LLC	U
Wellington Management Company LLP	U
Fisher Investments, Inc.	U
BlackRock Financial Management, Inc.	U
Metropolitan West Asset Management LLC	U
Pyrford International, Ltd.	U

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?

Yes [X] No []

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes [X] No []

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table belo

or the table below.				
1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
		, ,		\ /
107313	NISA Investment Advisors, LLC	549300L1IG2JOW7XNY28	SEC	NO
106595	Wellington Management Company LLP	549300YHP12TEZNLCX41	SEC	NO
107342	Fisher Investments, Inc.	549300YOG7L5RIDRN993	SEC	NO
107105	BlackRock Financial Management, Inc.	549300LVXYIVJKE13M84	SEC	NO
104571	Metropolitan West Asset Management LLC	5493004MDKGXC00IY283	SEC	NO
105646	Pyrford International, Ltd.	549300N5W87B2ISAUG48	SEC	NO

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes [X] No []

If yes, complete the following schedule: 29.2

30.

, 00, 00,			owing concadic.			
1 CUSIP			2 Name of Mutual Fund	3 Book/Adjusted Carrying Value		
693390	60	1	PIMCO Short-term Instl	\$	1,709,804	
72201F	49	0	PIMCO Income Instl	\$	38,481,214	
29.2999 T	OTAL			\$	40,191,018	

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
PIMCO Short-term Instl	PIMCO Short Asset Portfolio	\$ 377,867	09/30/2018
PIMCO Short-term Instl	PIMCO Short-Term Floating NAV Portfolio III	\$ 16,859	09/30/2018
PIMCO Short-term Instl	Holmes Master Issuer PLC 2.561% due 10/15/2054	\$ 16,785	09/30/2018
PIMCO Short-term Instl	VW CR, Inc. 2.800% due 12/10/2018	\$ 12,523	09/30/2018
PIMCO Short-term Instl	Dell International LLC 3.480% due 06/01/2019	\$ 11,604	09/30/2018
PIMCO Income Instl	Credit Suisse Mortgage Capital Trust 3.361% due 09/25/2048	\$ 1,047,843	09/30/2018
PIMCO Income Instl	Credit Suisse Mortgage Capital Trust 3.939% due 06/01/2050	\$ 975,884	09/30/2018
PIMCO Income Instl	Brazil Letras do Tesouro National 0.000% due 01/01/2019	\$ 901,230	09/30/2018
PIMCO Income Insti	US Treasury Note 2.250% due 12/31/2023	\$ 768,085	09/30/2018
PIMCO Income Instl	Fannie Mae 4.000% due 10/01/2047	\$ 648,408	09/30/2018

Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value

		1		2		3
						ss of Statement over Fair ue (-), or Fair Value over
		Statement (Admitted) Value		Fair Value		Statement (+)
30.1	Bonds	\$ 897,534,122	\$	911,753,440	\$	14,219,318
30.2	Preferred Stocks	\$ 756,802	\$	756,802	\$	0
30.3	Totals	\$ 898,290,924	\$	912,510,242	\$	14,219,318

30.4 Describe the sources or methods utilized in determining the fair values:

> The Company obtains at least one price from a third party pricing service or its custodian, which also uses a pricing service, for bonds and preferred stocks. In most instances, the Company obtains more than one price and evalutes between the pricing sources for any outliers or stale prices. Assuming prices are not stale and are reasonable between sources, the Company uses a pre-established hierarchy to conclude on which pricing source to utilize.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic 31 2 copy) for all brokers or custodians used as a pricing source?

Yes[X] No[]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Yes [X] No []

PART 1 - COMMON INTERROGATORIES

32 2 If no, list exceptions:

37.2

- By self-designating 5Gl securities, the reporting entity is certifying the following elements for each self-designation 5Gl security: 33.
 - Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not
 - Issuer or obligor is current on all contracted interest and principal payments. h
 - The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes[] No[X]

- By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 - The security was purchased prior to January 1, 2018. a.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is C. shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes[] No[X]

35.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? 2,047,806

35.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement

2 Name Amount Paid Blue Cross Blue Shield Association \$ 1,342,103

36 1 Amount of payments for legal expenses, if any? 1,410,265

\$

36.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal

expenses during the period covered by this statement.

1	2
Name	Amount Paid
	\$

37.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? 166,741

List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
	\$

PART 2 – HEALTH INTERROGATORIES

.1	Does t	he reporting entity have any direct Medicare	Supplement Insurance	ce in force?				Yes [X]	No []
.2	If yes, i	indicate premium earned on U.S. business of	only.				\$	420	,781,140
.3	What p	portion of Item (1.2) is not reported on the Mo	edicare Supplement I	nsurance Experience Exhibit?			\$		0
	1.31	Reason for excluding:							
1.4	Indica	ite amount of earned premium attributable to	o Canadian and/or Ot	her Alien not included in Item ((1.2) above.		\$		0
1.5	Indica	te total incurred claims on all Medicare Sup	plement insurance.				\$	341,	414,664
.6	Individ	ual policies:							
	Most c	urrent three years:							
	1.61	Total premium earned					\$	66,	214,519
	1.62	Total incurred claims					\$	57,	387,065
	1.63	Number of covered lives							43,432
	All yea	rs prior to most current three years:							
	1.64	Total premium earned					\$	354,	566,621
	1.65	Total incurred claims					\$	284,	027,599
	1.66	Number of covered lives					-		130,988
.7	Group	policies:							,
		urrent three years:							
	1.71	Total premium earned					\$		0
	1.72	Total incurred claims					\$		0
	1.73	Number of covered lives					-		0
		rs prior to most current three years:							
	1.74	Total premium earned					\$		0
	1.75	Total incurred claims					\$		0
	1.76	Number of covered lives					<u>*</u>		0
	Health								0
•	rioditii	1000.		1		2			
				Current Year		Prior Year			
	2.1	Premium Numerator	\$	2,615,762,137	\$	2,656,090,417			
	2.2	Premium Denominator	\$	2,615,762,137	\$	2,656,090,417			
	2.3	Premium Ratio (2.1/2.2)		100.0%		100.0%			
	2.4	Reserve Numerator	\$	421,984,380	\$	430,238,208			
	2.5	Reserve Denominator	\$	421,984,380	\$	430,238,208			
	2.6	Reserve Ratio (2.4/2.5)		100.0%		100.0%			
.1		e reporting entity received any endowment of		hospitals, physicians, dentists	s, or others that is	agreed will be returned when,			
•		if the earnings of the reporting entity permit	s?					Yes []	No [X]
.2	If yes,	give particulars:							
.1		copies of all agreements stating the period a	nd nature of hospitals	', physicians', and dentists' car	re offered to subs	cribers and dependents been			
		ith the appropriate regulatory agency?						Yes [X]	No []
.2		reviously filed, furnish herewith a copy(ies)		Do these agreements include	additional benefi	its offered?		Yes [X]	No []
.1	Does t	he reporting entity have stop-loss reinsurance	ce?					Yes []	No [X]
.2	If no, e	explain: ompany retains all risk.							
		STIPATIVE CALIFORNIA C							
.3	The Co	um retained risk (see instructions)							
	The Co						\$	9,9	99,999
	The Co	um retained risk (see instructions)					\$ \$	9,9	99,999
	The Co	um retained risk (see instructions) Comprehensive Medical							
	Maximu 5.31 5.32	um retained risk (see instructions) Comprehensive Medical Medical Only					\$	9,9	0
	Maximu 5.31 5.32 5.33	um retained risk (see instructions) Comprehensive Medical Medical Only Medicare Supplement					\$	9,9	0 99,999

Reserves exceed regulatory requirements. Member of lowa Life & Health Insurance Guaranty Association under lowa Code 508C.

Does the reporting entity set up its claim liability for provider services on a service date basis?

7.1

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

Yes [X] No []

7.2	If no, g	ive details								
•	.									
8.		_	ion regarding participating providers:							0 000
	8.1		at start of reporting year							8,828
0.4	8.2		at end of reporting year							9,204
9.1			business subject to premium rate gua	arantees?					Yes []	No [X]
9.2		direct premium earned:	rantees with rate guarantees betweer	15 26 months				\$		0
		·	-	1 13-30 1110111118	1			· ·		
10.1		·	rantees over 36 months		ita mensidar an	ntro eta O		\$	Van IV 1	0
10.1 10.2		ne reporting entity have	Incentive Pool, Withhold or Bonus Ar	rangements in	its provider co	ntracts?			Yes [X]	No []
10.2	If yes: 10.21	Maximum amount pa	avable bonuses						25.	754,118
	10.21	Amount actually paid								723,469
	10.22	Maximum amount pa	•						20,	0
	10.23									0
11 1		Amount actually paid	•							
11.1	11.12	reporting entity organize A Medical Group/Sta							Yes[]	No [X]
	11.12	·	e Association (IPA), or,						Yes[]	No [X]
	11.14	A Mixed Model (comb							Yes []	No [X]
11.2			o Statutory Minimum Capital and Sur	olus Requireme	ents?				Yes [X]	No[]
	11.3		e of the state requiring such minimum						[]	[]
	11.4	If yes, show the amo	unt required.					\$	5,	000,000
11.5	Is this a	amount included as part	t of a contingency reserve in stockholo	der's equity?					Yes []	No [X]
11.6	If the a	mount is calculated, she	ow the calculation							
12.	List ser	rvice areas in which rep	orting entity is licensed to operate:							
		Name of	1 Service Area							
	lowa									
10.1		Dakota	h a albh a a sin a a a a a a a a a a						V []	Na IVI
13.1	-		health savings accounts?	anartina data				¢	Yes[]	No [X]
13.2			runt of custodial funds held as of the re	eporting date.				\$	Voc I 1	0
13.3 13.4	-		r for health savings accounts? nce of the funds administered as of th	o roporting dat	2			¢	Yes[]	No [X]
14.1			s reported on Schedule S, Part 3, auth					Ψ Yes [] No[]	N/A [X]
14.1		•	ease provide the following:	ionzed remsure	15!			165 [] NO[]	IWA[A]
17.2	II tilo ti	110WC1 to 14.1 to yea, pic	1	2	3	4	As	sets Supporting Reser	ve Credit	
			Company	NAIC Company	Domiciliary	Reserve	5 Letters of	6 Trust	7	
			Name	Code	Jurisdiction	Credit	Credit	Agreements	Oth	er
				0		\$	\$	\$	\$	
15.	Provide	e the following for individ	dual ordinary life insurance* policies (U.S. business o	only) for the cu	rrent year (prior to	reinsurance assumed	or ceded).		
	15.1	Direct Premium Writt	en					\$		0
	15.2	Total Incurred Claims	S					\$		0
	15.3	Number of Covered I	Lives							0
			*Ordina	ıry Life İnsuraı	nce Includes					
			Term (whether full underwriting, lim	nited underwritir	ng, jet issue, "s	short form app")				
			Whole Life (whether full underwriting	ng, limited unde	rwriting, jet iss	ue, "short form app)")			
			Variable Life (with or without secon	dary guarantee	e)					
			Universal Life (with or without seco	ndary guarante	e)					
			Variable Universal Life (with or with	nout secondary	guarantee)					
16.	Is the r	reporting entity licensed	or charted, registered, qualified, eligib	ole or writing bu	isiness in at le	ast two states?			Yes [X]	No []
16.1			assume reinsurance business that co	vers risks resid	ing in at least	one state other tha	n the state of domicile	of the	V 22 1 1	No t Vi
	reportif	ng entity?							Yes[]	No [X]

FIVE-YEAR HISTORICAL DATA

	1 2018	2 2017	3 2016	4 2015	5 2014
Balance Sheet Items (Pages 2 and 3)					
Total admitted assets (Page 2, Line 28)	2,438,665,980	2,423,522,882	2,129,480,667	2,043,927,418	2,018,044,802
2. Total liabilities (Page 3, Line 24)	871,361,997	899,403,414	799,205,981	721,945,415	658,295,751
Statutory minimum capital and surplus requirement	5,000,000	5,000,000	5,000,000	5,000,000	5,000,000
4. Total capital and surplus (Page 3, Line 33)	1,567,303,983	1,524,119,468	1,330,274,686	1,321,982,003	1,359,749,051
Income Statement Items (Page 4)					
5. Total revenues (Line 8)	2,625,888,455	2,646,943,303	2,656,267,827	2,535,836,243	2,409,436,738
6. Total medical and hospital expenses (Line 18)	2,263,994,172	2,275,307,305	2,305,850,113	2,212,112,391	2,073,932,641
7. Claims adjustment expenses (Line 20)	91,852,920	97,845,527	92,200,746	80,305,713	82,762,682
8. Total administrative expenses (Line 21)	274,070,264	262,907,000	311,879,974	287,600,076	294,844,970
9. Net underwriting gain (loss) (Line 24)	(4,028,901)	10,883,471	(53,663,006)	(44,181,937)	(42,103,555
10. Net investment gain (loss) (Line 27)	157,999,161	59,429,982	47,645,297	50,740,427	67,560,197
11. Total other income (Lines 28 plus 29)	(312,917)	(19,298,372)	(492,595)	(316,495)	(134,587
12. Net income or (loss) (Line 32)	127,475,750	43,089,081	(26,507,304)	(1,832,005)	15,373,055
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	11,906,851	46,705,072	(818,390)	9,876,191	(26,314,624
Risk-Based Capital Analysis					
14. Total adjusted capital	1,567,303,983	1,524,119,468	1,330,274,686	1,321,982,003	1,359,749,051
15. Authorized control level risk-based capital	153,973,624	147,166,563	142,115,619	140,286,299	132,386,288
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	1,223,786	1,254,850	1,273,834	1,299,157	1,286,750
17. Total member months (Column 6, Line 7)	14,804,430	15,050,662	15,216,983	15,535,137	15,356,046
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19).	86.2	86.0	86.8	87.2	86.1
20. Cost containment expenses	0.7	0.8	0.7	0.7	1.1
21. Other claims adjustment expenses	2.8	2.9	2.8	2.4	2.4
22. Total underwriting deductions (Line 23)	100.2	99.6	102.0	101.7	101.7
23. Total underwriting gain (loss) (Line 24)	(0.2)	0.4	(2.0)	(1.7)	(1.7
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13, Col. 5)	321,729,907	341,115,730	239,887,885	216,690,565	275,522,701
25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)]	299,267,250	323,492,015	227,765,081	223,935,080	270,586,203
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)					
27. Affiliated preferred stocks (Sch D. Summary, Line 18, Col. 1)					
28. Affiliated common stocks (Sch D. Summary, Line 24, Col. 1)	491,359,226	495,750,290	414,739,140	403,191,015	405,977,457
29. Affiliated short-term investments (subtotal included in Sch. DA, Verification, Column 5, Line 10)					
30. Affiliated mortgage loans on real estate					
31. All other affiliated					
32. Total of above Lines 26 to 31	491.359.226	495 750 290	414 739 140	403 191 015	405 977 457

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

If no, please explain:

Yes [] No []

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

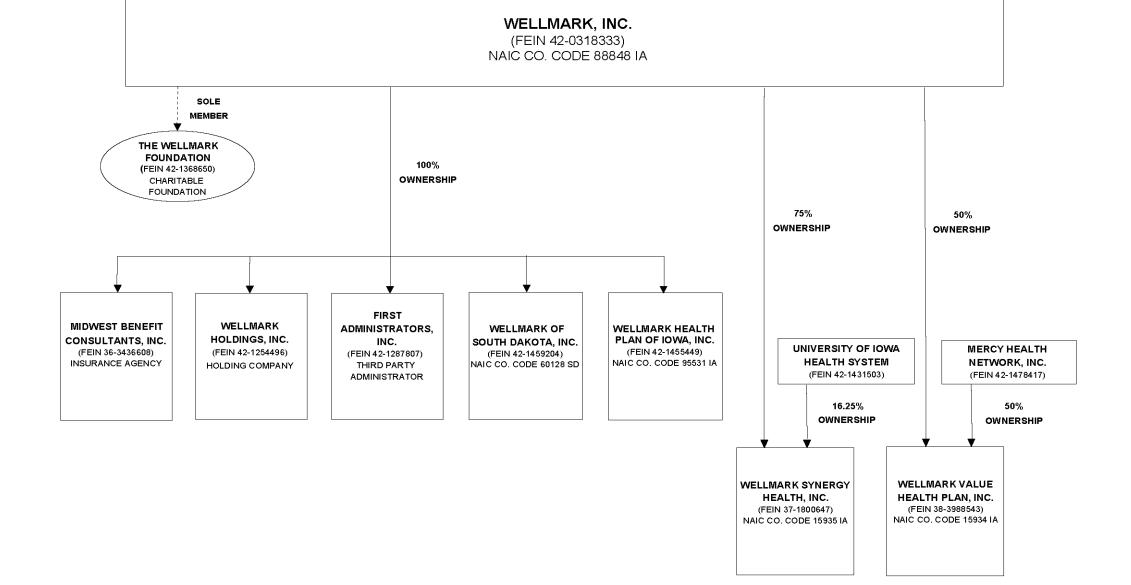
Allocated by States and Territories

Allocated by States and Territories										
		1	1 Direct Business Only 2 3 4 5 6 7						8	9
		Active	Accident & Health	Modicara	Modiocid	Federal Employees Health Benefits Plan	Premiums and	Property/ Casualty	Total	Deposit-
	State, Etc.	Status (a)	& Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Premiums	Other Considerations	Premiums	Columns 2 Through 7	Type Contracts
1.	AlabamaAL	N							0	
2.	AlaskaAK								0	
3.	ArizonaAZ								0	
4.	ArkansasAR								0	
5.	CaliforniaCA								0	
6.	ColoradoCO								0	
7. o	ConnecticutCT	N							0	
8. 9.	DelawareDE District of ColumbiaDC	N							0	
9. 10.	FloridaFL									
11.	GeorgiaGA									
12.	HawaiiHI	N							0	
13.	ldahoID								0	
14.	IllinoisIL	N							0	
15.	IndianaIN	N							0	
16.	lowaIA		.2,334,465,933			242,891,867			2,577,357,800	
17.	KansasKS								0	
18.	KentuckyKY	N							0	
19.	LouisianaLA								0	
20.	MaineME	N							0	
21.	MarylandMD	N							0	
22.	MassachusettsMA	N							0	
23.	MichiganMI								0	
24.	MinnesotaMN	N							0	
25. 26.	MississippiMS MissouriMO	N								
20. 27.	MontanaMT	N							0	
28.	NebraskaNE	N							0	
29.	NevadaNV	N							0	
30.	New HampshireNH								0	
	New JerseyNJ								0	
32.	New MexicoNM	N							0	
33.	New YorkNY	N							0	
34.	North CarolinaNC	N							0	
35.	North DakotaND	N							0	
36.	OhioOH	N							0	
37.	OklahomaOK								0	
38.	OregonOR	N							0	
39.	PennsylvaniaPA								0	
40.	Rhode IslandRI								0	
41.	South CarolinaSC								0	
42.	South DakotaSD		38,404,337						38,404,337	
43.	TennesseeTN								0	
44.	TexasTX	N							0	
45.	UtahUT	N							0	
46. 47	VermontVT	N							0	
47. 48.	VirginiaVA WashingtonWA									
48. 49.	West VirginiaWV								0	
49. 50.	WisconsinWI								0	
50. 51.	WyomingWY								0	
51. 52.	American SamoaAS								0	
53.	GuamGU								0	
54.	Puerto RicoPR								0	
	U.S. Virgin IslandsVI	N							0	
	Northern Mariana IslandsMP	N							0	
57.	CanadaCAN								0	
58.	Aggregate Other alienOT	XXX	0	0	0	0	0	0	0	
59.	Subtotal	XXX	.2,372,870,270	0	0	242,891,867	0	0	2,615,762,137	0
	Reporting entity contributions for Employee Benefit Plans		0.070.070.070			040 004 007			0	
υ Ί.	Total (Direct Business)	XXX	.2,372,870,270	0	0		0	0	2,615,762,137	
2004					AILS OF WRITE				^	1
8001.									0	
3002.									0	
3003.	Summary of remaining write-ins for li	ino 50						^	0	
	Summary of remaining write-ins for i		0	0	0	0	0	0	0	0

(a) Active Status Counts:
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG......
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state

0

R - Registered - Non-domiciled RRGs... Q - Qualified - Qualified or accredited reinsurer.... N - None of the above - Not allowed to write business in the state...



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